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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Hazzard, Shannon, M, ,			2. Candidate's FEC Identification Number P00012484	
(b) Address (number and street) 605 CROSSPOINT DR		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code NEW BRAUNFELS TX 78130		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought Presidential	6. State & District of Candidate 00		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) SHANNON HAZZARD FOR PRESIDENT		
(b) Address (number and street) 605 CROSSPOINT DR		
(c) City, State, and ZIP Code NEW BRAUNFELS TX 78130		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State, and ZIP Code		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Hazzard, Shannon, M, , [Electronically Filed]	Date 06/25/2019
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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