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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	Moreira, Elizabeth, , ,		1. 36 - 1.1			0.0- "1:	-!- FFC ! !	::e: 4:	le con l		
	(b) Address (number and street) 11539 Leffingwell Rd.	☐ Check if address changed				Candidate's FEC Identification Number H2CA38245					
) City, State, and ZIP Code					3. Is This	Ne		v	Amended	
	Norwalk					Stateme	. ,	OR	×	(A)	
4.	Party Affiliation	5. Office Sought				trict of Candida	ate				
	DEMOCRATIC PARTY	House			CA	38					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
(a) Name of Committee (in full) ELIZABETH MOREIRA FOR CONGRESS											
	(b) Address (number and street) 728 W. EDNA PLACE										
	(c) City, State, and ZIP Code										
	COVINA				CA	91722					
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 Date											
M	oreira, Elizabeth, , ,		[Electronically Filed]			03/23/2022					
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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