## FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full)				
Shocklee, Levii, , ,				
(b) Address (number and street) 3920 Cross Bend Dr			2. Candidate's FEC Identification Number H8TX06217	
(c) City, State, and ZIP Code				3. Is This New Amended
Arlington	T	X 7601	6	Statement X (N) OR (A)
4. Party Affiliation	5. Office Sought		6. State & Distr	rict of Candidate
DEMOCRATIC PARTY	House		ТХ	06
DE	SIGNATION OF PR	INCIPAL	CAMPAIGN	
7. I hereby designate the following nan	ned political committee as n	ny Principal (	Campaign Comm	nittee for the $\frac{2018}{(\text{year of election})}$ election(s).
NOTE: This designation should be fi	led with the appropriate off	ice listed in th	ne instructions.	
(a) Name of Committee (in full) Shocklee For Congr	ess Committee			
(b) Address (number and street) 3920 Cross Bend Dr				
(c) City, State, and ZIP Code				
Arlington			ТХ	76016
<ul> <li>8. I hereby authorize the following name candidacy.</li> <li>NOTE: This designation should be find the final structure of Committee (in full)</li> </ul>	ed committee, which is NO	T my principa		nmittee, to receive and expend funds on behalf of my
(b) Address (number and street)				
(c) City, State, and ZIP Code				
I certify that I have exa	mined this Statement and to	o the best of	my knowledge al	and belief it is true, correct and complete.
Signature of Candidate				Date
Shocklee, Levii, , ,		[Elect	tronically Filed]	07/21/2017
NOTE: Submission of false, erroneous,	or incomplete information r	may subject t	he person signin	ng this Statement to penalties of 2 U.S.C. §437g.
				FEC FORM 2 (REV. 02/20