

Image# 202008269267005318

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Londrigan, Betsy, Dirksen, ,			2. Candidate's FEC Identification Number H8IL13150	
(b) Address (number and street) PO Box 275		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Springfield		IL	62705-0275	3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate IL 13		

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) Betsy Dirksen Londrigan for Congress		
(b) Address (number and street) PO Box 275		
(c) City, State, and ZIP Code Springfield IL 62705-0275		

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) Hold the House Victory Fund		
(b) Address (number and street) 430 South Capitol Street, SE 2nd Floor		
(c) City, State, and ZIP Code Washington DC 20003		

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 Londrigan, Betsy, Dirksen, , <i>[Electronically Filed]</i>	Date 08/26/2020
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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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Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

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)

Illinois Democrats 2020

(b) Address (number and street)

918 Pennsylvania Avenue, SE

(c) City, State, and ZIP Code

Washington

DC

20003

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)

Betsy Dirksen Londrigan 2020 Victory Fund

(b) Address (number and street)

PO Box 83142

(c) City, State, and ZIP Code

Gaithersburg

MD

20883

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)

Women's Wave Illinois 2020

(b) Address (number and street)

PO Box 83142

(c) City, State, and ZIP Code

Gaithersburg

MD

20883

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)

House Victory Project 2020

(b) Address (number and street)

918 PENNSYLVANIA AVE SE

(c) City, State, and ZIP Code

WASHINGTON

DC

20003

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of Additional Authorized Committees

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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)

Second Service Victory Fund

(b) Address (number and street)

2910 E Gary Way

(c) City, State, and ZIP Code

Phoenix

AZ

85042

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)

Nadler Victory Fund

(b) Address (number and street)

200 WEST 79TH STREET, #8N

(c) City, State, and ZIP Code

NEW YORK

NY

10024

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

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