

Image# 202007299261188336

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Bolz, Kate, , ,			2. Candidate's FEC Identification Number H0NE01120	
(b) Address (number and street) PO Box 23107		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Lincoln NE 68542		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 NE 01		

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) Kate Bolz for Congress		
(b) Address (number and street) PO Box 23107		
(c) City, State, and ZIP Code Lincoln NE 68542		

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) Bolz Victory Fund		
(b) Address (number and street) 3701 O Street Suite 200		
(c) City, State, and ZIP Code Lincoln NE 68510		

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 Bolz, Kate, , , [Electronically Filed]	Date 07/29/2020
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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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