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FEC FORM 2

STATEMENT OF CANDIDACY

	Name of Candidate (in full)									
	Smoak, Justin, Odell, , (b) Address (number and street) ☐ Check if address changed 2. Ca							atification N	lumbor	
(D) <i>i</i>	(b) Address (number and street)			ss changed		Candidate's FEC Identification Number H0WA01132				
(c) (City, State, and ZIP Code					3. Is This		ew	Amended	
	Bellingham		WA	A 9822		Staten	,) OR	(A)	
	ty Affiliation	5. Office Soug	ht		6. State & Dist		date			
NP	A	House			WA	01				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7. I he	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)									
NO.	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
(a) Name of Committee (in full) Smoak 2020										
(b) <i>i</i>	Address (number and street) 643 Marine Drive									
(c) (City, State, and ZIP Code									
(-)	Bellingham				WA	98225	5			
	Dellingham				•••	00220	•			
(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.										
NOTE: This designation should be filed with the principal campaign committee.										
(a) l	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				
Smoak	Justin, Odell, ,	[Electronically Filed]				05/21/2020				
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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FEC FORM 2 (REV. 02/2009)