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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Nam										
	e of Candidate (in full)									
	ias, Juana, , ,									
	(b) Address (number and street) ☐ Check if address PO Box 555					2. Candidate's FEC Identification Number H8MA03122				
(c) City,	State, and ZIP Code					3. Is Thi		New	Ame	ended
Law	vrence		MA	01840)	Stater	nent 🗶 (N) OR	(A)	
4. Party Af	filiation	5. Office Sought			6. State & Dist	rict of Candi	date			
DEMO	CRATIC PARTY	House			MA	03				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)										
	This designation should be	filed with the approp	riate office li	sted in th	ne instructions.					
` ,	ne of Committee (in full)									
Ju	ana Matias for Co	ongress								
	ress (number and street) Box 555									
(c) City,	State, and ZIP Code									
La	wrence				MA	01840	0			
	DE	SIGNATION C		_	THORIZED g Representativ		TEES			
0										
candida	authorize the following narcy.	ned committee, which	ch is NOT my	/ principa	al campaign cor	mmittee, to re	eceive and e	xpend fund	s on behalf o	f my
candida	•					mmittee, to re	eceive and e	xpend fund	s on behalf o	f my
candida	су.					nmittee, to re	eceive and e	xpend fund	s on behalf o	f my
candida	cy. This designation should be					mmittee, to re	eceive and e	xpend fund	s on behalf o	f my
candida NOTE: 1	cy. This designation should be see of Committee (in full)					mmittee, to re	eceive and e	xpend fund	s on behalf o	f my
candida NOTE: 1	cy. This designation should be					mmittee, to re	eceive and e	xpend fund	s on behalf o	f my
candida NOTE: 1	cy. This designation should be see of Committee (in full)					mmittee, to re	eceive and e	xpend fund	s on behalf o	f my
candidade NOTE: 1 (a) Nam (b) Addr	cy. This designation should be the of Committee (in full) ress (number and street)					mmittee, to re	eceive and e	xpend fund	s on behalf o	f my
candidade NOTE: 1 (a) Nam (b) Addr	cy. This designation should be see of Committee (in full)					mmittee, to re	eceive and e	xpend fund	s on behalf o	f my
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candidade NOTE: 1 (a) Nam (b) Addr	cy. This designation should be the of Committee (in full) ress (number and street)	iled with the principa	al campaign	committe	ee.					f my
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