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FEC FORM 2

STATEMENT OF CANDIDACY

_	())) () () () () () () () ()										
1.	(a) Name of Candidate (in full)										
	Kopser, Joseph, , ,		1. '£1-1			0.0	-4-1- FEO I-I	416 41 1			
	(b) Address (number and street) PO Box 701711	☐ Check if address changed				2. Candidate's FEC Identification Number H8TX21190					
	(c) City, State, and ZIP Code					3. Is This	s Ne	ew .		Amended	
	San Antonio		TX	7827	0	Staten	nent (N) OR	×	(A)	
4.	Party Affiliation	5. Office Sough	t		6. State & Dist	rict of Candi	date				
	DEMOCRATIC PARTY	House			TX	21					
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	I hereby designate the following nar	med political com	ımittee as m	y Principal (Campaign Comr	mittee for the	2018 (year of elec		ion(s).		
	NOTE: This designation should be f	filed with the app	ropriate offic	ce listed in t	ne instructions.						
	(a) Name of Committee (in full)	_									
	Kopser for Congres	S									
	(b) Address (number and street) PO Box 701711										
	(c) City, State, and ZIP Code										
	San Antonio				TX	78270)				
	DE	SIGNATION (In			I HORIZED g Representativ		IEES				
8.	I hereby authorize the following nan	ned committee, v	which is NO	Γ my princip	al campaign cor	nmittee, to re	eceive and exp	end funds	s on beha	alf of my	
	candidacy.										
	NOTE: This designation should be f	iled with the prin	cipal campa	ign committe	ee.						
	(a) Name of Committee (in full)										
	Serve America Victor	ory									
	(b) Address (number and street) PO Box 2013										
	1 O BOX 2013										
	(c) City, State, and ZIP Code										
	Salem				MA	01970	1				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.											
Si	gnature of Candidate					Date					
	opser, Joseph, , ,						40				
	F , , , , ,			[Elect	tronically Filed]	09/10/20	118				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											
NC	DTE: Submission of false, erroneous	, or incomplete in	formation m	nay subject t	he person signii	ng this Stater	ment to penalt	ies of 2 U.	S.C. §43	37g.	
NC	OTE: Submission of false, erroneous	, or incomplete in	formation m	nay subject t	he person signii	ng this Stater	ment to penalt	ies of 2 U.	.S.C. §43	37g.	
NC	OTE: Submission of false, erroneous	, or incomplete in	formation m	nay subject t	he person signii	ng this Stater	ment to penalt	ies of 2 U.	S.C. §43	57g.	

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	² of	2

DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

3.	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)	(a) Name of Committee (in full)											
	Digidems Committee												
	(b) Address (number and street) 8931 Beverly Blvd Ste 638												
	(c) City, State, and ZIP Code												
	Los Angeles CA 90048												
3.	 I hereby authorize the following named committee, which is NOT my principal campaign committee, to candidacy. NOTE: This designation should be filed with the principal campaign committee. 	o receive and expend funds on behalf of my											
	(a) Name of Committee (in full)												
	Cullum Number Victory Fund												
	(b) Address (number and street) 9 East St												
	Unit 2												
	(c) City, State, and ZIP Code												
	Boston MA 02111												
3.	3. I hereby authorize the following named committee, which is NOT my principal campaign committee, to candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)	o receive and expend funds on behalf of my											
	(b) Address (number and street) (c) City, State, and ZIP Code												
3.	3. I hereby authorize the following named committee, which is NOT my principal campaign committee, to candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)	ned committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my should be filed with the principal campaign committee.											
	(b) Address (number and street)												
	(c) City, State, and ZIP Code												