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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
	Haston, William, , , b) Address (number and street) □ Check if address changed					2. Candidate's FEC Identification Number				
	3904 North Druid Hills Road					H0GA04130				
	c) City, State, and ZIP Code						lew		Amended	
	Decatur		G/	3003		`	N) OR	X	(A)	
4.	Party Affiliation	5. Office Soug	ıht		6. State & Dist	rict of Candidate 04				
	DEMOCRATIC PARTY	House			GA					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
(a) Name of Committee (in full) WILLIAM HASTON FOR CONGRESS										
(b) Address (number and street) 3904 NORTH DRUID HILLS ROAD										
	(c) City, State, and ZIP Code									
	DECATUR				GA	30033				
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)										
(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.										
Si	gnature of Candidate					Date				
H	aston, William, , ,	[Electronically Filed]				10/13/2019				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										

FEC FORM 2 (REV. 02/2009)