FEC FORM 2

STATEMENT OF CANDIDACY

_							
1.	(a) Name of Candidate (in full)						
	Gray, Aida, Estrada, ,				100 1111 55011		
	(b) Address (number and street) PO Box 96	☐ Check if address changed		Candidate's FEC Identification Number H8MI06171			
	(c) City, State, and ZIP Code				3. Is This No		
	Comstock	ı	MI 4904	1 1	Statement (N) OR (A)	
4.	Party Affiliation	5. Office Sought		6. State & Dist	rict of Candidate		
	DEMOCRATIC PARTY	House		MI	06		
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) COMMITTEE TO ELECT AIDA GRAY							
	(b) Address (number and street) PO BOX 96						
	(c) City, State, and ZIP Code						
				MI	49041		
	COMSTOCK			IVII	49041		
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.							
Signature of Candidate Date							
Gi	ray, Aida, Estrada, ,		[Elec	ctronically Filed]	12/13/2018		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.							
NC	OTE: Submission of false, erroneous	, or incomplete information	may subject	the person signir	ng this Statement to penal	ties of 2 U.S.C. §437g.	
NC	OTE: Submission of false, erroneous	, or incomplete information	may subject	the person signir	ng this Statement to penal	ies of 2 U.S.C. §437g.	

FEC FORM 2 (REV. 02/2009)