## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Nelson, Preston, , Mr,							
	(b) Address (number and street) 2 SE Crescent Dr	☐ Check if address changed			Candidate's FEC Identification Number     H0IL08165			
	(c) City, State, and ZIP Code					ew	Amended	
	Mount Vernon	IL 62864			Statement (N	N) OR	(A)	
4.	Party Affiliation	5. Office Sought		6. State & Distr	rict of Candidate			
	LIBERTARIAN	House		IL	08			
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)							
Preston Nelson for Congress								
	(b) Address (number and street) 2 SE Crescent Dr							
	(c) City, State, and ZIP Code							
	Mount Vernon			IL	62864			
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 exa	amined this Statement and	d to the best o	f my knowledge al	nd belief it is true, correct	t and complete	).	
Sig	gnature of Candidate				Date			
Nelson, Preston, , Mr, [Electronically Filed]				10/13/2020				
NC	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)