## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Thran, Alexandra, Nicole, ,							
	(b) Address (number and street) PO Box 503	☐ Check if address changed				2. Candidate's FEC Identification Number S2VT00177		
	(c) City, State, and ZIP Code						ew Amended	
	Warren		VT	0567	'4	Statement (N	I) OR (A)	
4.	Party Affiliation	5. Office Soug	ght			rict of Candidate		
	DEMOCRATIC PARTY	Senate			VT	00		
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIGN	COMMITTEE		
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 election(s). (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full)							
Friends of Niki Thran								
	(h) Address (number and street)							
	(b) Address (number and street) PO Box 503							
	(c) City, State, and ZIP Code							
	Warren				VT	05674		
	DE			_	THORIZED  ng Representative	COMMITTEES es)		
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								
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	certify that I have exa	mined this Sta	tement and to	the best of	mv knowledae a	nd belief it is true, correct	and complete.	
	·							
	gnature of Candidate					Date		
11	hran, Alexandra, Nicole, ,			[Elec	tronically Filed]	08/06/2021		
N	OTE: Submission of false, erroneous	, or incomplete	information n	nay subject	the person signin	ng this Statement to penal	ties of 2 U.S.C. §437g.	
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