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## FEC FORM 2 STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	Gill, Louis, , ,										
	(b) Address (number and street) 8200 Stockdale Hwy Suite M10-116	☐ Check if address changed			2. Candidate's FEC Identification Number H2CA23163						
	(c) City, State, and ZIP Code	3. Is This	Nev	N		Amended					
	Bakersfield	CA 93311				Stateme	nt 🗶 (N)	OR	ш	(A)	
4.	Party Affiliation	5. Office Sought			6. State & Dist	rict of Candida	te				
	DEMOCRATIC PARTY	House			CA	23					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)										
	Louis Gill for Congre	ess									
	(b) Address (number and street)										
	8200 Stockdale Hwy										
	Suite M10-16										
	(c) City, State, and ZIP Code										
	Bakersfield				CA	93311					
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											
0.	candidacy.	ned committee, w	THEIT IS NOT	тту рттстр	ar campaign con	illillitiee, to rece	erve and exp	ena ranas	OH Den	all Of Hily	
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											
	Lagrett Ab - Alb -	unain a al this Otsi	nonto::-It	tha ba-t-'	nove len overlandar	and half-fit is			242		
	I certify that I have exa	minea this Staten	nent and to t	ne best of l	my knowieage a	ina bellet it is ti	ue, correct a	па сотрі	ete. 		
Si	gnature of Candidate					Date					
$G_i$	Gill, Louis, , , [Electronically Filed]						I				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											
	OTE: Submission of false, erroneous,	, or incomplete inf	ormation ma	ay subject t	he person signir	ng this Stateme	ent to penalti	es of 2 U.	S.C. §43	37g.	
	OTE: Submission of false, erroneous,	, or incomplete inf	ormation ma	ay subject t	he person signir	ng this Stateme	ent to penalti	es of 2 U.	S.C. §43	37g.	
	OTE: Submission of false, erroneous,	, or incomplete inf	ormation ma	ay subject t	he person signir	ng this Stateme	ent to penalti	es of 2 U.	S.C. §43	37g.	

FEC FORM 2 (REV. 02/2009)