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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	Dolly Elizondo										
	(b) Address (number and street) 808 S. Shary Rd. Suite #5 Box #362	☐ Check if address changed				2. Candidate's FEC Identification Number H6TX15170					
	(c) City, State, and ZIP Code					3. Is This	Nev	V		Amended	
	Mission	Mission TX 78572					× (N)	OR	ш	(A)	
4.	Party Affiliation	5. Office Soug	ght		6. State & Dist	rict of Candidate					
	DEMOCRATIC PARTY	House			TX	15					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)										
Dolly Elizondo for Congress											
_	(b) Address (number and street)										
	808 S. Shary Rd. Suite #5										
	Box #362										
	(c) City, State, and ZIP Code										
	Mission				TX	78572					
	DE	SIGNATIO	N OF OT		TUODIZED	COMMITTE	ES				
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)											
	(h) Adduses (number and street)										
	(b) Address (number and street)										
(c) City, State, and ZIP Code											
	I certify that I have exa	mined this Sta	tement and to	the best of	my knowledge a	and belief it is true	e, correct a	nd compl	ete.		
Si	gnature of Candidate					Date					
Dolly Elizondo						12/02/2015					
	•			[Elec	tronically Filed]	12/02/2013					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											
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FEC FORM 2 (REV. 02/2009)