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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Kizik, Ellen, (Elle), ,		
(b) Address (number and street) 8594 E. 116th St. Apt. 435		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Fishers IN 46038		2. Candidate's FEC Identification Number H0IN05193
4. Party Affiliation W		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
5. Office Sought House		6. State & District of Candidate IN 05

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) Ellen (Elle) Kizik for US Congress (Indiana's 5th Congressional District)		
(b) Address (number and street) 10454 E. 79th St.		
(c) City, State, and ZIP Code Indianapolis IN 46236		

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 Kizik, Ellen, (Elle), , [Electronically Filed]	Date 06/16/2019
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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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