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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Weaver, Erika, C, ,								
	(b) Address (number and street) 2508 Buxton Dr. Apt 214	treet)			Candidate's FEC Identification Number H0IL15194				
	(c) City, State, and ZIP Code						New	Amended	
	Mattoon		IL	6193	8	Statement X (N) OR	(A)	
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	rict of Candidate			
	DEMOCRATIC PARTY	House			IL	15			
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)								
Friends of Erika C. Weaver									
	(b) Address (number and street) P.O. Box 818								
	(c) City, State, and ZIP Code								
	Mattoon				IL	61938			
(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								
	·	mined this Stat	ement and to	the best of	my knowledge a	and belief it is true, correc	et and comple	te.	
	gnature of Candidate		Date						
W	eaver, Erika, C., ,	[Electronically Filed]				12/03/2019			
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)