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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								<u>_</u>	
	Ramirez-Rosa, Carlos, , Mr.,									
	Address (number and street)					2. Candidate's FEC Identification Number H8IL04142				
	(c) City, State, and ZIP Code						New		Amended	
	Chicago		IL	6061	8	Statement X	(N) OR		(A)	
4.	Party Affiliation	5. Office Soug	jht		6. State & Dist	trict of Candidate				
	DEMOCRATIC PARTY	House			IL	04				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full)									
Committee to Elect Carlos Ramirez-Rosa										
	(b) Address (number and street) 2959 N. Milwaukee									
	(c) City, State, and ZIP Code									
	Chicago				IL	60618				
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)										
	(a) Name of Committee (in fail)									
(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						Date				
Ramirez-Rosa, Carlos, , Mr., [1					tronically Filed]	11/30/2017				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										

FEC FORM 2 (REV. 02/2009)