

Image# 201604199012592476

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Mrs. Jacqueline Kimotho-Gonzalez			2. Candidate's FEC Identification Number H6VA04079	
(b) Address (number and street) 5912 Omo Rd		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code North Chesterfield VA 23234		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate VA 04		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) Friends of Jackee Gonzalez		
(b) Address (number and street) P.O. Box 37233		
(c) City, State, and ZIP Code North Chesterfield VA 23234		

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 Mrs. Jacqueline Kimotho-Gonzalez <i>[Electronically Filed]</i>	Date 04/19/2016
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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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