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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) GREENAWAY, DIEDRA, MICHELLE, ,			2. Candidate's FEC Identification Number H8CA25108	
(b) Address (number and street) 1510 THOMAS DR		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code LANCASTER CA 93535		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate CA 25		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) COMMITTEE TO ELECT DIEDRA GREENAWAY		
(b) Address (number and street) 9420 RESEDA BLVD 503		
(c) City, State, and ZIP Code NORTHRIDGE CA 91324		

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 GREENAWAY, DIEDRA, MICHELLE, , [Electronically Filed]	Date 09/19/2017
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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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