FEC FORM 2 STATEMENT OF CANDIDACY

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1.	(a) Name of Candidate (in full)									
	Lutz, Mary Ann, , ,									
	(b) Address (number and street) 100 W Lemon Avenue, # 103						2. Candidate's FEC Identification Number H4CA31139			
	(c) City, State, and ZIP Code					3. Is This		New	Amended	
	Monrovia	CA 91016				Stater	nent 🗶	(N) OR	(A)	
4.	Party Affiliation	5. Office Sough	ıt		6. State & Dist	rict of Candi	date			
	DEMOCRATIC PARTY	House			CA	31				
	DE	SIGNATION	N OF PRI	NCIPAL	CAMPAIGN		ITTEE			
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 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)									
	Lutz for Congress									
	(b) Address (number and street) 371 Lakeport Blvd., # 391									
	(c) City, State, and ZIP Code									
	Lakeport				CA	95453	3			
8.	I hereby authorize the following name candidacy. NOTE: This designation should be formula (a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code					nmittee, to re	eceive and	expend fund	ds on behalf of my	
_	Leartify that L have ave	minod this State	mont and to	the best of	my knowlodgo o	and balief it is	truo corr	act and com	plata	
	I certify that I have exa	inineu ins Sidle	ment anu lo	ule Desi Ol	ny knowledge a		s irue, com	ot and com	piele.	
	gnature of Candidate					Date				
Lı	utz, Mary Ann, , ,			[Elect	ronically Filed]	06/14/20	23			
N	OTE: Submission of false, erroneous	or incomplete ir	nformation m	nay subject t	he person signir	ng this State	ment to pe	nalties of 2 l	J.S.C. §437g.	
									FEC FORM 2 (REV. 02/2009	