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FEC FORM 2

STATEMENT OF CANDIDACY

1.											
	(a) Name of Candidate (in full)										
	Gallardo, Stephanie, D, ,		ck if address c	h a w a:l		0.0	10'0 FFO ! !	mtifineti t	lumb or		
((b) Address (number and street) P.O. Box 42679		Candidate's FEC Identification Number H2WA09115								
	(c) City, State, and ZIP Code					3. Is This		ew	Amend	led	
	Seattle		WA	98146		Statem	· ·	N) OR	(A)		
4.	Party Affiliation	5. Office Sought			6. State & Dist		late				
	DEMOCRATIC PARTY	House			WA	09					
	DE	SIGNATION	OF PRINC	CIPAL	CAMPAIGN	N COMMI	TTEE				
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)										
ı	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)										
	People of the 9th for	· Stephanie									
	(1) A 11										
	(b) Address (number and street) P.O. Box 46279										
	(c) City, State, and ZIP Code										
	Seattle				WA	98146					
	DE	SIGNATION					TEES				
		(Incl	uding Joint Fu	ındraising	Representativ	es)					
	I hereby authorize the following nam candidacy.	ned committee, wh	nich is NOT my	/ principa	l campaign con	nmittee, to re	ceive and ex	pend funds	on behalf of m	У	
ı	NOTE: This designation should be f	led with the princi	pal campaign	committe	e.						
	(a) Name of Committee (in full)										
	(1)										
-	(b) Address (number and street)										
	(b) Address (number and street)										
	(b) Address (number and street) (c) City, State, and ZIP Code										
	(c) City, State, and ZIP Code										
		mined this Statem	ent and to the	best of n	ny knowledge a	nd belief it is	true, correct	t and compl	ete.		
	(c) City, State, and ZIP Code	mined this Statem	ent and to the	best of n	ny knowledge a	nd belief it is	true, correct	t and compl	ete.		
Sig	(c) City, State, and ZIP Code I certify that I have exa	mined this Statem	ent and to the					t and compi	ete.		
Sig	(c) City, State, and ZIP Code I certify that I have exa	mined this Statem	ent and to the		ny knowledge a ronically Filed]	Date		t and compl	ete.		
Sig	(c) City, State, and ZIP Code I certify that I have exa	mined this Statem	ent and to the			Date		t and compl	ete.		
Sig Ga	(c) City, State, and ZIP Code I certify that I have exa			[Electr	onically Filed]	Date 02/16/202	21				
Sig Ga	(c) City, State, and ZIP Code I certify that I have exagnature of Candidate Illardo, Stephanie, Denea, ,			[Electr	onically Filed]	Date 02/16/202	21				
Sig Ga	(c) City, State, and ZIP Code I certify that I have exagnature of Candidate Illardo, Stephanie, Denea, ,			[Electr	onically Filed]	Date 02/16/202	21				

FEC FORM 2 (REV. 02/2009)