

Image# 202007149244554532

PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Hilliard, Maggie, Jo, ,		
(b) Address (number and street) PO Box 8001		☐ Check if address changed
(c) City, State, and ZIP Code Louisville KY 40257		2. Candidate's FEC Identification Number S0KY00511
4. Party Affiliation DEMOCRATIC PARTY		3. Is This Statement ☒ New (N) OR ☐ Amended (A)
5. Office Sought Senate		6. State & District of Candidate KY 00

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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 MAGGIE JO HILLIARD		
(b) Address (number and street) PO BOX 8001		
(c) City, State, and ZIP Code LOUISVILLE KY 40257		

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 Hilliard, Maggie, J, , [Electronically Filed]	Date 07/14/2020
--	--------------------

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--