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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full) Lewis, Kathyrn, , ,						
_	(b) Address (number and street) 1098 CYPRESS PLACE	☐ Check if address changed				2. Candidate's FEC Identification Number	
	(c) City, State, and ZIP Code					H8VA06195 3. Is This New Amended	
	BEDFORD		VA	2452	3	Statement (N) OR (A)	
4.	Party Affiliation	5. Office Soug	ht			trict of Candidate	
	REPUBLICAN PARTY	House			VA	06	
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE						
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (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 KATHRYN LEWIS						
	(b) Address (number and street) 1098 CYPRESS PLACE						
	(c) City, State, and ZIP Code						
	BEDFORD				VA	24523	
 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 exa	mined this Stat	ement and to	the best of	my knowledge a	and belief it is true, correct and complete.	
Si	gnature of Candidate					Date	
Le	ewis, Kathryn, , ,		[Electronically Filed]			04/19/2018	
NO	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.						

FEC FORM 2 (REV. 02/2009)