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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Harrison, Brigid, Callahan, ,		., .					
	(b) Address (number and street) 2906 Longport Drive	□ Check	if address	changed		Candidate's FEC Identification Number H0NJ02197		
	(c) City, State, and ZIP Code					3. Is This New Amende	d	
	Longport		NJ	08403	3	Statement (N) OR (A)		
4.	Party Affiliation	5. Office Sought				rict of Candidate		
	DEMOCRATIC PARTY	House			NJ	02		
	DE	SIGNATION C	F PRIN	CIPAL	CAMPAIGN	N COMMITTEE		
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full) BRIGID FOR SOUT	H JERSEY						
	(b) Address (number and street) PO BOX 3201							
	(c) City, State, and ZIP Code							
	MARGATE				NJ	08402		
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							
							_	
	·	mined this Stateme	nt and to th	e best of r	ny knowledge a	and belief it is true, correct and complete.		
Si	gnature of Candidate					Date		
Н	arrison, Brigid, , ,			[Electi	ronically Filed]	01/30/2020		
_			_					
N	OTE: Submission of false, erroneous,	or incomplete infor	mation may	subject th	ne person signir	ng this Statement to penalties of 2 U.S.C. §437g.		
N	OTE: Submission of false, erroneous,	or incomplete infor	mation may	subject th	ne person signir	ng this Statement to penalties of 2 U.S.C. §437g.	_	

FEC FORM 2 (REV. 02/2009)