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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)					
	Bohannan, Christina, , ,					
	(b) Address (number and street) 1725 Windsor Court	☐ Check if address changed			Candidate's FEC Identification Number H2IA02111	
	(c) City, State, and ZIP Code lowa City	I.A	A 5224	5	3. Is This New Amended Statement (N) OR X (A)	
4.	Party Affiliation	5. Office Sought		6. State & Dist	rict of Candidate	
	DEMOCRATIC PARTY	House		IA	01	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE						
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)					
	NOTE: This designation should be filed with the appropriate office listed in the instructions.					
	(a) Name of Committee (in full)					
Christina Bohannan for Congress						
	(b) Address (number and street)					
	P.O. Box 722					
	(c) City, State, and ZIP Code					
	Iowa City			IA	52244	
 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 						
	(c) City, State, and ZIP Code					
_	I certify that I have exa	mined this Statement and t	o the best of	my knowledge a	and belief it is true, correct and complete.	
Si		mined this Statement and t	o the best of	my knowledge ε	and belief it is true, correct and complete. Date	
	I certify that I have exa	mined this Statement and t	o the best of	my knowledge a	· · · · · · · · · · · · · · · · · · ·	
Ве	I certify that I have exa gnature of Candidate ohannan, Christina, , ,				Date	

FEC FORM 2 (REV. 02/2009)