

Image# 202001149167166557

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) CARAWAY, BARBARA LEN MALLORY, , ,		2. Candidate's FEC Identification Number H2TX30079
(b) Address (number and street) <input type="checkbox"/> Check if address changed PO BOX 398136		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code DALLAS TX 75339		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate TX 30

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) BARBARA MALLORY CARAWAY FOR CONGRESS		
(b) Address (number and street) P. O. BOX 398136		
(c) City, State, and ZIP Code DALLAS TX 75339		

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 Mallory Caraway, Barbara, Len, , <i>[Electronically Filed]</i>	Date 01/14/2020
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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