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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Scholten, James, D., ,			2. Candidate's FEC Identification Number H8IA04106	
(b) Address (number and street) 2825 S Cypress St		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Sioux City IA 51106		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate IA 04		

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) SCHOLTEN4IOWA CAMPAIGN COMMITTEE		
(b) Address (number and street) P.O. BOX 3531		
(c) City, State, and ZIP Code SIOUX CITY IA 51102		

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) House Victory 2018		
(b) Address (number and street) 611 Pennsylvania Ave SE Num 143		
(c) City, State, and ZIP Code Washington DC 20003		

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 Scholten, James, D., , <i>[Electronically Filed]</i>	Date 08/20/2019
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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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