

FEC FORM 2
STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) CAMILLE LOMBARDI-OLIVE		2. FEC Candidate Identification Number
(b) Address (number and street) <input type="checkbox"/> Check if address changed 789 EVEREST ROAD		
(c) City, State, and ZIP Code GALENA, MO 65656		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation REPUBLICAN	5. Office Sought U.S. CONGRESS	6. State & District of Candidate DISTRICT 1 MISSOURI

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) CAMILLE FOR CONGRESS 2018 - HEART OF MISSOURI ♥
(b) Address (number and street) P.O. Box 2443
(c) City, State, and ZIP Code BRANSON WEST, MO 65737

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) CAMILLE FOR CONGRESS 2018 - CROWDPAC
(b) Address (number and street) crowdpac.com/c/camille for congress heart
(c) City, State, and ZIP Code of Missouri ♥

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 Camille Lombardi-Olive	Date March 26, 2018
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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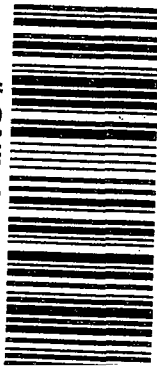
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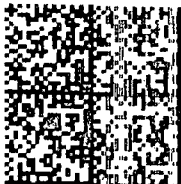


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65737

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Federal Election Commission
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