

Image# 202002179186508689

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Briones, Heidi, , ,		
(b) Address (number and street) 9255 NE Rockspring St Apt B421		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Hillsboro		OR 97006
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought House
6. State & District of Candidate OR 01		
2. Candidate's FEC Identification Number H0OR01186		
3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		

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) Friends of Heidi Briones		
(b) Address (number and street) 9255 NE Rockspring Street Apt B421		
(c) City, State, and ZIP Code Hillsboro		
OR 97006		

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 Briones, Heidi, , , [Electronically Filed]	Date 02/17/2020
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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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