

Image# 202008139261300700

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Schrier, Kim, , Dr.,			2. Candidate's FEC Identification Number H8WA08189	
(b) Address (number and street) PO Box 2728		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Issaquah WA 98027		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 WA 08		

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) DR KIM SCHRIER FOR CONGRESS		
(b) Address (number and street) PO BOX 2728		
(c) City, State, and ZIP Code ISSAQUAH WA 98027		

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) Batleground Women of WA		
(b) Address (number and street) 603 Stewart St Suite 819		
(c) City, State, and ZIP Code Seattle WA 98101		

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 Schrier, Kim, , Dr., <i>[Electronically Filed]</i>	Date 08/13/2020
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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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Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

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)

NADLER VICTORY FUND

(b) Address (number and street)

200 WEST 79TH STREET, #8N

(c) City, State, and ZIP Code

NEW YORK

NY

10024

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)

HOLD THE HOUSE PAC

(b) Address (number and street)

119 1ST AVENUE SOUTH

SUITE 320

(c) City, State, and ZIP Code

SEATTLE

WA

98104

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.

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(b) Address (number and street)

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NEW YORK

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(a) Name of Committee (in full)

HOLD THE HOUSE PAC

(b) Address (number and street)

119 1ST AVENUE SOUTH

SUITE 320

(c) City, State, and ZIP Code

SEATTLE

WA

98104

Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

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)

HOLD THE HOUSE FRONTLINE FUND

(b) Address (number and street)

401 2ND AVENUE SOUTH
SUITE 303

(c) City, State, and ZIP Code

SEATTLE WA 98104

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)

SEEC VICTORY FUND

(b) Address (number and street)

PO BOX 15320

(c) City, State, and ZIP Code

WASHINGTON DC 20003

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

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