FEC FORM 2 STATEMENT OF CANDIDACY

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(a) Name of Candidate (in full) (b) Smith		·····		
Aja Smith	70		T = = 2'2'	
(b) Address (number and street) ☐ Check if address changed 15705 Guajome Rd		2. FEC Candidate Identification Number H8CA41170		
(c) City, State, and ZIP Code			3. Is This New	Amended \
Moreno Valley, CA 92551			Statement (N)	OR X (A)
4. Party Affiliation	5. Office Sought	6. State & Dist	rict of Candidate	
Republican	House	CA 41		
DE	SIGNATION OF PRINCIPA	L CAMPAIGI	N COMMITTEE	
7. I hereby designate the following nar	ned political committee as my Princip	al Campaign Comr		election(s).
NOTE: This designation should be f	iled with the appropriate office listed i	the instructions.	(year of electio	n)
(a) Name of Committee (in full)				
Aja Smith for Congress 20	22.			•
(b) Address (number and street)				
4202 Brockton Ave. Suite	100		···-	
(c) City, State, and ZIP Code				
Riverisde, CA 92501				
				;
· DE	SIGNATION OF OTHER A	UTHORIZED	COMMITTEES	•
	(Including Joint Fundrai			•
				* *
8. I hereby authorize the following nan	ned committee, which is NOT my princ	ipal campaign cor	nmittee, to receive and exper	nd funds on behalf of my
candidacy.				
NOTE: This designation should be	filed with the principal campaign comm	nittee.		
Aja Smith for Congress 20	020			
(a) Name of Committee (in full)	020		······································	
				•
4201 Brockton Ave. Suite	100			
(b) Address (number and street)				
Riverside, CA 92501	•			
(c) City, State, and ZIP Code		····		
I certify that I have exam	mined this Statement and to the best	of my knowledge a	and belief it is true, correct ar	nd complete.
Signature of Candidate	-//		Date	
\bigcap	<i>V</i> .		1 _ /	,
(AM (MIIT		1 1115/	7071
	mu.		1/13/6	V 7
NOTE: Submission of false, erroneous	, or incomplete information may subje	ct the person signi	ng this Statement to penaltie	s of 52 U.S.C. §30109.
		T		
9-00068				FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	 of	

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			
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)			
	(a) Name of Committee (in run)			
	(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			

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