Image# 201709139074687735 PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
		Haaf, Grace, , ,							
	(b) Address (number and street) PO Box 485					2. Candidate's FEC Identification Number H8IL06170			
	(c) City, State, and ZIP Code							nded	
	Lombard		IL	6014	8	Statement X (N	N) OR (A)		
4.	Party Affiliation	5. Office Sough	nt			rict of Candidate			
	DEMOCRATIC PARTY	House			IL	06			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full)								
Grace Haaf for Congress									
	(b) Address (number and street) PO Box 485							-	
	(c) City, State, and ZIP Code								
	Lombard				IL	60148			
	DE	SIGNATIO	N OF OTI	HER AU	THORIZED	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)									
(b) Address (number and street)									
(c) City, State, and ZIP Code									
		1 1/1/ 0: :	, ,		, , ,	11 11 7 7 7 1			
		mined this State	ement and to	tne best of	my knowledge a	nd belief it is true, correct	and complete.		
	gnature of Candidate	Date							
Н	aaf, Grace, , ,	[Electronically Filed]				09/13/2017			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									

FEC FORM 2 (REV. 02/2009)