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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	Meza, Raymond, Anthony, , Jr										
	b) Address (number and street)					2. Candidate's FEC Identification Number H8CA34175					
	(c) City, State, and ZIP Code					3. Is This	Ne	ew .	A	mended	
	Los Angeles		CA	9003	1	Statem	ent X (N) OR	(/	۹)	
4.	Party Affiliation	5. Office Sough	nt		6. State & Dist	rict of Candid	ate				
	DEMOCRATIC PARTY	House			CA	34					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2017 (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 Raymond Meza											
	(b) Address (number and street) 4113 Berenice Ave.										
	(c) City, State, and ZIP Code										
	Los Angeles				CA	90031					
_											
	DE	SIGNATION	N OF OTI	HFR AU	THORIZED	COMMIT.	TFFS				
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)											
8.	I hereby authorize the following name candidacy.	ned committee,	which is NO	Γ my princip	al campaign con	nmittee, to red	ceive and exp	oend funds	on behal	f of my	
	NOTE: This designation should be f	iled with the prin	icipal campa	ign committ	ee.						
_	(a) Name of Committee (in full)										
	(-)										
	(b) Address (number and street)										
_	(c) City, State, and ZIP Code										
	(o) only, orace, and in occur										
	I certify that I have exa	mined this State	ement and to	the hest of	mv knowledge a	and helief it is	true correct	and comp	lete		
		Tillinea triis Otate	and to	THE DESI OF	Thy knowledge a		true, correct	and comp			
Signature of Candidate						Date					
Meza, Raymond, Anthony, , Jr. [Elec						_					
	eza, Raymond, Anthony, , Jr.			[Elec	tronically Filed]	12/23/201	6				
	eza, Raymond, Anthony, , Jr.			[Elec	tronically Filed]	12/23/201	6				
NO	eza, Raymond, Anthony, , Jr. DTE: Submission of false, erroneous,	or incomplete in	nformation m					ies of 2 U.	S.C. §437	' g.	
NO		or incomplete i	nformation m					ies of 2 U.	S.C. §437	'g.	
NO		or incomplete in	nformation m					ies of 2 U.	S.C. §437	' g.	

FEC FORM 2 (REV. 02/2009)