

FEC FORM 2
STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) Drew Eugene Leavens			2. Candidate's FEC Identification Number C00554493	
(b) Address (number and street) <input type="checkbox"/> Check if address changed PO Box 28672				
(c) City, State, and ZIP Code San Diego, CA 92198		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation Democrat	5. Office Sought CA CD-45	6. State & District of Candidate Congress, California District 45		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 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) Drew Leavens for Congress	
(b) Address (number and street) PO Box 28672	
(c) City, State, and ZIP Code San Diego, CA 92198	

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 	Date 2/24/2014
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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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