NOTE: OF: OF: OCKARDOS

FEC FORM 2 STATEMENT OF CANDIDACY

	2018 NOV -6 AM 11: 12				
1. (a) Name of Candidate (in full)					
CHRISTINA GERASI MOS BILLINGS-ELI					
(b) Address (number and street)	ged 2. FEC Candidate dentification Number				
(c) City, State, and ZIP Code	3. Is This New Amended				
BEVERLY HILLS CALIFORNIA GOLI	[* 1				
4. Party Affiliation 5. Office Sought	6. State & District of Candidate CON LD EKIONAL				
PRESIDENT	CALIFORNIA 33 RD DISTRICT				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE					
- 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2610				
7. I hereby designate the following named political committee as my Princ	(vear of election)				
NOTE: This designation should be filed with the appropriate office listed	I in the instructions.				
(a) Name of Committee (in full)					
CHRISTINAGERASIMOS BULINGS-E	LIACCOMMITTEE FOR PREJOENT				
(b) Address (number and street)					
16950077 BEVERLY DRIVE, S (c) City, State, and ZIP Code	017E N27				
BEVERLY HILLS, CALIFOR NII	+ 90010				
- Company Chapter	1 10412				
	AUTHORIZED COMMITTEES aising Representatives)				
 I hereby authorize the following named committee, which is NOT my pr candidacy. NOTE: This designation should be filed with the principal campaign com 					
(a) Name of Committee (in full)					
(a) Name of Committee (in full)					
(b) Address (number and street)					
(c) City, State, and ZIP Code					
Localify that I have a variety of this Chatamant and to the har	at of multipopulation and heliof it is true, sowered and complete				
<u> </u>	st of my knowledge and belief it is true, correct and complete.				
Signature of Candidate Mittin u Yelli mos Billings – E	lian Date OCTOBER 26, 2018				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.					
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

7	a) Name of Committee (in full)				-	. , , ' &				
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·-	and the state of t									, .
(b) Address (number and street)			`	• •					
(c) City, State, and ZIP Code					_				
-										
	hereby authorize the following named committee					ittee, to rec	eive and	expend fun	nds on beh	alf of my
	andidacy. NOTE: This designation should be file	ed with the p	orincipal cam	paign comr	nittee.					. : 1.
(a) Name of Committee (in full)		. ,				,	<u>-</u>		
				. 1		.	•			
(b) Address (number and street)	<u> </u>					<u> </u>	<u> </u>		- :
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	c) City, State, and ZIP Code		· ·	•					_	
_	c) City, State, and ZIP Code hereby authorize the following named committee candidacy. NOTE: This designation should be file			cipal campa	lign comm				_	
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	Name(s) of Signer(s)	
who proved to me on the basis of satisfactor subscribed to the within instrument and acknown his her their authorized capacity (iese), and that by or the entity upon behalf of which the person(s)	wledged to me that he she the his he the heir signature a on the	ey executed the same in instrument the person(s),
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