

Image# 202010079285047797

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) De La Isla, Michelle, , ,			2. Candidate's FEC Identification Number HOKS02196	
(b) Address (number and street) PO Box 67101		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Topeka KS 66667		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate KS 02		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) MICHELLE FOR KANSAS		
(b) Address (number and street) PO BOX 67101		
(c) City, State, and ZIP Code TOPEKA KS 66667		

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) END CITIZENS UNITED 2020		
(b) Address (number and street) 514 DANIELS ST #286		
(c) City, State, and ZIP Code RALEIGH NC 27605		

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 De La Isla, Michelle, , , <i>[Electronically Filed]</i>	Date 10/07/2020
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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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Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

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)

MICHELLE DE LA ISLA VICTORY FUND 2020

(b) Address (number and street)

514 DANIELS STREET
NUM 286

(c) City, State, and ZIP Code

RALEIGH NC 27605

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)

MICHELLE DE LA ISLA VICTORY FUND 2020

(b) Address (number and street)

514 DANIELS STREET
NUM 286

(c) City, State, and ZIP Code

RALEIGH NC 27605

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)

REPRESENTATION MATTERS III

(b) Address (number and street)

910 17TH ST NW STE 925

(c) City, State, and ZIP Code

WASHINGTON DC 20006

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)

MIGHTY MUJERES VICTORY FUND

(b) Address (number and street)

910 17TH ST NW STE 925

(c) City, State, and ZIP Code

WASHINGTON DC 20006