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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Horvath, Helen, Lili, Dr.,		book if add	00 000000		2. Condidate's FFO Liter	atification Number	
	2127 Arnold Way, Ste 2311	Address (number and street)				2. Candidate's FEC Identification Number H0CA50152		
	(c) City, State, and ZIP Code					3. Is This No	ew Amended	
	Alpine CA 91901					Statement (N	I) OR (A)	
4.	Party Affiliation	5. Office Soug	jht		6. State & Distr	rict of Candidate 50		
	UN	House			CA	50		
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)								
Horvath Campaign for Congress								
(b) Address (number and street)								
	2127 Arnold Way, Ste 2311							
	(c) City, State, and ZIP Code							
	Alpine				CA	91901		
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)								
(b) Address (ridiliber alia street)								
(c) City, State, and ZIP Code								
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I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.								
	gnature of Candidate					Date		
H	orvath, Helen, Lili, Dr.,			[Elec	tronically Filed]	08/26/2019		
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)