Image# 201907269151675871 PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Smith, Christopher, Bartholom								
	b) Address (number and street)					Candidate's FEC Identification Number H0MI07135			
	(c) City, State, and ZIP Code						lew	Amended	
	Saline MI 48176					Statement (I	N) OR	(A)	
4.	Party Affiliation	5. Office Soug	jht			rict of Candidate			
	DEMOCRATIC PARTY	House			MI	07			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
(a) Name of Committee (in full)									
Committee to Elect C B Smith									
	(b) Address (number and street) 546 Ironwood Way								
	(c) City, State, and ZIP Code								
	Saline				MI	48176			
(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									
Sı	nith, Christopher, Bartholomew, ,	[Electronically Filed]				07/26/2019			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									
\Box									

FEC FORM 2 (REV. 02/2009)