FEC FORM 2 STATEMENT OF CANDIDACY

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1.	(a) Name of Candidate (in full)								
	Thompson, Larry, , ,								
	(b) Address (number and street) 10586 W. Pico Blvd. Suite 291	□ Check if addre	2. Candidate's FEC Identification Number H0CA37175						
	(c) City, State, and ZIP Code				3. Is This		ew		Amended
	Los Angeles	-				ent 🗶 (N) OR		(A)
4.	Party Affiliation	5. Office Sought		6. State & Distr	rict of Candida	ate			
	NPA	House		CA	37				
	DE	SIGNATION OF PR		CAMPAIGN		TEE			
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election(s).								
	NOTE: This designation should be	iled with the appropriate off	ice listed in th	ne instructions.					
	(a) Name of Committee (in full)								
	Larry Thompson for	Congress							
	(b) Address (number and street) 10586 W. Pico Blvd.								
	Suite 291								
	(c) City, State, and ZIP Code								
	Los Angeles			CA	90064				
8.	I hereby authorize the following nar candidacy. NOTE: This designation should be f (a) Name of Committee (in full)				nmittee, to rec	eive and ex	pend funds	on bel	nalf of my
	(b) Address (number and street)								
	(b) Address (number and street)								
	(b) Address (number and street) (c) City, State, and ZIP Code								
	(c) City, State, and ZIP Code	mined this Statement and t	o the best of	my knowledge al	nd belief it is a	rue, correct	and compl	ete.	
	(c) City, State, and ZIP Code	mined this Statement and to	o the best of	my knowledge al		rue, correct	and compl	ete.	
	(c) City, State, and ZIP Code I certify that I have exa ignature of Candidate	mined this Statement and to	o the best of l	my knowledge al	nd belief it is a	rue, correct	and compl	ete.	
	(c) City, State, and ZIP Code	mined this Statement and to		my knowledge al ronically Filed]			and compl	ete.	
T	(c) City, State, and ZIP Code I certify that I have exa ignature of Candidate		[Elect	ronically Filed]	Date 11/12/201	9			
T	(c) City, State, and ZIP Code I certify that I have exa ignature of Candidate hompson, Larry, , ,		[Elect	ronically Filed]	Date 11/12/201	9			 37g.
T	(c) City, State, and ZIP Code I certify that I have exa ignature of Candidate hompson, Larry, , ,		[Elect	ronically Filed]	Date 11/12/201	9			