

Image# 202209189528505919

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Mathis, Elizabeth, , ,		
(b) Address (number and street) 320 S Blairsferry Crossing		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Hiawatha IA 52233		2. Candidate's FEC Identification Number H2IA01089
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought House
		6. State & District of Candidate IA 02
3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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) Liz Mathis for Congress		
(b) Address (number and street) P.O. Box 2370		
(c) City, State, and ZIP Code Cedar Rapids IA 52406		

### 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) Liz Mathis Victory Fund		
(b) Address (number and street) 5825 Waterbury Circle		
(c) City, State, and ZIP Code Des Moines IA 50312		

*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 Mathis, Elizabeth, , ,  <i>[Electronically Filed]</i>	Date 09/18/2022
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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)

IOWA 123 VICTORY FUND

(b) Address (number and street)

5825 WATERBURY CIR

(c) City, State, and ZIP Code

DES MOINES

IA

50312

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)

STAND UP FOR DEMOCRACY JFA

(b) Address (number and street)

PO BOX 5418

(c) City, State, and ZIP Code

TAKOMA PARK

MD

20913

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)

TURN IOWA BLUE 2022

(b) Address (number and street)

2813 VIRGINIA PL

(c) City, State, and ZIP Code

DES MOINES

IA

50321

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