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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a)	Name of Candidate (in full)						
	Mangas Moniz, Rachel, Olivia,			,		10.0 EL 1 EFOLL (***)	
(b)	Address (number and street) 97 Gable Ct	□Chec	k if address c	hanged		Candidate's FEC Identification Number H0CA02153	
(c)	City, State, and ZIP Code					3. Is This New Amended	
	San Rafael		CA	94903	3	Statement (N) OR (A)	
4. Pa	rty Affiliation	5. Office Sought				rict of Candidate	
DI	EMOCRATIC PARTY	House			CA	02	
	DE	SIGNATION	OF PRINC	CIPAL	CAMPAIGN	N COMMITTEE	
7. I h	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)						
NO	OTE: This designation should be f	iled with the appro	priate office lis	sted in th	e instructions.		
(a)	Name of Committee (in full)						
	Friends of Rachel M	loniz					
(b)	Address (number and street)						
	1005 Northgate Dr. #174						
(c)	City, State, and ZIP Code						
(0)					CA	94903	
	San Rafael				OA	34300	
car		(Included and all of the committee, when the committee, when the committee is a second committee and the committee and t	uding Joint Fu	ndraisino	g Representativ	COMMITTEES es) nmittee, to receive and expend funds on behalf of my	
(a)	Name of Committee (in full)						
(b)	Address (number and street)						
(c)	City, State, and ZIP Code						
` ,							
	-	mined this Statem	ent and to the	best of r	my knowledge a	and belief it is true, correct and complete.	
	ature of Candidate	mined this Statem	ent and to the	best of r	ny knowledge a	and belief it is true, correct and complete. Date	
	-	mined this Statem	ent and to the		ny knowledge a ronically Filed]		
Mang	ature of Candidate as Moniz, Rachel, Olivia, ,			[Electi	ronically Filed]	Date	
Mang	ature of Candidate as Moniz, Rachel, Olivia, ,			[Electi	ronically Filed]	Date 12/28/2019	

FEC FORM 2 (REV. 02/2009)