

Image# 201909279163574952

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Sorensen, Soren, Christian, Mr.,			2. Candidate's FEC Identification Number H8MN08100	
(b) Address (number and street) PO Box 1388		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Cass Lake MN 56633		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC-FARM-LABOR	5. Office Sought House	6. State & District of Candidate MN 08		

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) SOREN SORENSEN FOR US HOUSE		
(b) Address (number and street) 4766 SOSUA RD NW UNIT 3B		
(c) City, State, and ZIP Code BEMIDJI MN 56601		

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)		
(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 Sorensen, Soren, C, Mr., <i>[Electronically Filed]</i>	Date 09/27/2019
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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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