FEC FORM 2 STATEMENT OF CANDIDACY

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	a) Name of Candidate (in full) Gomez, Meri, Lizet, Ms.,												
(b	b) Address (number and street) 2019 N Conway Ave	s (number and street)						2. Candidate's FEC Identification Number S4TX00771					
(c	ity, State, and ZIP Code Mission TX 78572					3. Is This Statem	~ ~ ~	New (N)	OR		Amended (A)		
	arty Affiliation DEMOCRATIC PARTY	5. Office Sought Senate			6. State & Distr TX	rict of Candid 00	late						
	DE	SIGNATION		CIPAL	CAMPAIGN		TTEE						
7. Ił	I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election(s).												
N	OTE: This designation should be	filed with the appro	priate office l	isted in th	ne instructions.		0	,					
(a	a) Name of Committee (in full)												
	MERI GOMEZ FOR	SENATE											
(b) Address (number and street)												
	2019 N CONWAY AVE												
(c	c) City, State, and ZIP Code												
	MISSION				ТХ	78572							
Ca	hereby authorize the following nar andidacy. OTE: This designation should be	ned committee, wh	ich is NOT m	y principa			ceive and	expend	l funds	on be	half of my		
	a) Name of Committee (in full)												
(b													
(b	b) Address (number and street)												
(b (c	 a) Address (number and street) c) City, State, and ZIP Code <i>I certify that I have example</i> 	amined this Statem	ent and to the	e best of I	my knowledge a		true, corre	ect and	compl	ete.			
(b (c	b) Address (number and street) c) City, State, and ZIP Code	nmined this Statem	ent and to the	e best of r	my knowledge a	nd belief it is Date	true, corre	ect and	compl	ete.			
(b (c Sign	 a) Address (number and street) c) City, State, and ZIP Code <i>I certify that I have example</i> 	nmined this Statem	ent and to the	e best of r	my knowledge a			ect and	compl	ete.			
(b (c Sign <i>Gom</i>	b) Address (number and street) c) City, State, and ZIP Code <i>I certify that I have exa</i>					Date 08/15/202	23				 137g.		
(b (c Sign <i>Gom</i>	b) Address (number and street) c) City, State, and ZIP Code <i>I certify that I have exa</i> rature of Candidate <i>nez, Meri, Lizet, Ms</i> ,					Date 08/15/202	23				137g.		