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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)
HAFNER, CAROL, , ,

(b) Address (number and street) ☐ Check if address changed
514 AMERICAS WAY SUITE 2296

2. Candidate's FEC Identification Number
P80006091

(c) City, State, and ZIP Code
BOX ELDER SD 57719

3. Is This Statement ☒ New (N) **OR** ☐ Amended (A)

4. Party Affiliation
DEMOCRATIC PARTY

5. Office Sought
Presidential

6. State & District of Candidate
00

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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)
CAROL HAFNER FOR PRESIDENT

(b) Address (number and street)
514 AMERICAS WAY SUITE 2296

(c) City, State, and ZIP Code
BOX ELDER SD 57719

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	Date
HAFNER, CAROL, , , ***[Electronically Filed]***	11/17/2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.