## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	Valerie Ervin (b) Address (number and street)	☐ Check if address changed				2. Candidate's FEC Identification Number					
	415 Schuyler Rd	- Oneok ii address onanged				H6MD08499					
	(c) City, State, and ZIP Code					3. Is This	\ /	lew		Amended	
	Silver Spring	MD 20910				Stateme	,	N) OR	Ш	(A)	
4.	Party Affiliation DEMOCRATIC PARTY	5. Office Soug House	ıht		6. State & Dist	rict of Candida 08	ate				
_	DEWOCKATIC PARTT	House			IVID						
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)										
	Friends of Valerie Ervin										
	(b) Address (number and street) 415 Schuyler Rd										
	(c) City, State, and ZIP Code										
					MD	20040					
	Silver Spring				MD	20910					
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.											
Si	Signature of Candidate Date										
Valerie Ervin [Electronically Filed				07/01/2015							
				[Elec	tronically Filed]	077017201	J				
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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FEC FORM 2 (REV. 02/2009)