

STATEMENT OF DESIGNATION OF COUNSEL

Provide one form for each Respondent/Witness

EMAIL cela@fec.gov

AR/MUR/RR	/P-MUR#_7901		
Name of Counse	el: Alicia Dearn		
Firm: Justitia	LLC		
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Saint	t Louis, MO 63119		
	Office#: 314-200-1302	Fax#:	
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E-mail: alicia(@dearnlaw.com		
	ed individual and/or firm is hereby des dother communications from the Com	mission and to act on my bel	
03/10/22 Date	Angela Fisher 4/19/2019 (Signature - Respondent/A		
	(Signature - Respondent/Agent/Treasurer) Title		
	Angela Fisher (Name – Please P	nint)	
	Angela Fisher		
RESPONDENT	(Please print Committee Name/ Company Name/Individual Named in Notification Letter)		
Mailing Address (Please Print)	s:		
	St. Petersburg, FL 33705		
	Home#:	Mobile#:	
	Office#:	Fax#:	
E-mail:			

This form relates to a Federal Election Commission matter that is subject to the confidentiality provisions of 52 U.S.C. § 30109(a)(12)(A). This section prohibits making public any notification or investigation conducted by the Federal Election Commission without the express written consent of the person under investigation.