Image# 201812139143378100 PAGE 1 / 1

## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)					<del></del>			
	Levin, Andy, , ,					1			
	(b) Address (number and street) PO Box 380381	☐ Check if address changed			2. Candidate's FEC Identification Number H8MI09118				
	(c) City, State, and ZIP Code					3. Is This	New		Amended
	Clinton Township		MI	4803	8	Statement <b>X</b>	(N) OR		(A)
4.	Party Affiliation	5. Office Sought				rict of Candidate			
	DEMOCRATIC PARTY	House			MI	09			
	DE	SIGNATION	OF PRII	NCIPAL	CAMPAIGN	N COMMITTEE			
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election) election(s).									
	NOTE: This designation should be to	filed with the appro	priate office	e listed in th	ne instructions.				
	(a) Name of Committee (in full)								
	Andy Levin for Cong	gress							
_	(b) Address (number and street)								
	PO Box 380381								
	(c) City, State, and ZIP Code								
	Clinton Township				MI	48038			
	DE			_	_	COMMITTEES			
		(Inci	uaing Joint	Fundraisin	g Representative	es)			
8.	I hereby authorize the following nan candidacy.	ned committee, wh	ich is NOT	my principa	al campaign con	nmittee, to receive and	d expend fund	s on beh	nalf of my
	NOTE: This designation should be f	iled with the princi	pal campaiç	gn committe	ee.				
	(a) Name of Committee (in full)								-
	(b) Address (number and street)								
	(b) riddress (number and street)								
	(c) City, State, and ZIP Code								
	I certify that I have exa	mined this Statem	ent and to t	the best of	my knowledge a	and belief it is true, cor	rect and comp	lete.	
Si	gnature of Candidate					Date			
Le	Levin, Andy, , , [Electronically Filed]				12/13/2018				
					· · · · · · · · · · · · · · · · · · ·				
N	OTE: Submission of false, erroneous	, or incomplete info	ormation ma	ay subject t	he person signir	ng this Statement to pe	enalties of 2 U	.S.C. §4	37g.
N	OTE: Submission of false, erroneous	, or incomplete info	ormation ma	ay subject t	he person signir	ng this Statement to pe	enalties of 2 U	.S.C. §4	37g.
NO	OTE: Submission of false, erroneous	, or incomplete info	ormation ma	ay subject t	he person signir	ng this Statement to pe	enalties of 2 U	.S.C. §4	37g.

FEC FORM 2 (REV. 02/2009)