Image# 201508199000864180 PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

| 1. (a) Name of Can | | | | | | | | | | |
|--|-----------------------|----------------------|----------------|-------------------|---|-----------------|-----------------|---------------|----------------|-----|
| Christopher | | | | | | 1 | | | | |
| (b) Address (number and street) ☐ Check if address cha 550 Centre St Apt C1 | | | | ess changed | Candidate's FEC Identification Number P60010147 | | | lumber | | |
| (c) City, State, ar | nd ZIP Code | | | | | 3. Is This | \ \ \ | ew | Amend | led |
| Nutley | | | N. | J 0711 | 0 | Staten | ment X (N | N) OR | (A) | |
| 4. Party Affiliation | | 5. Office Soug | ht | | 6. State & Dis | trict of Candi | date | | | |
| DEMOCRATIC | PARTY | President | al | | | | | | | |
| | DE | SIGNATIO | N OF PR | INCIPAL | CAMPAIG | и сомм | ITTEE | | | |
| 7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election) | | | | | | | | | | |
| | gnation should be t | filed with the ap | propriate offi | ce listed in | he instructions. | | | | | |
| (a) Name of Con | , , | | | | | | | | | |
| Monda 2 | 2016 | | | | | | | | | |
| (b) Address (nun 550 Centre | , | | | | | | | | | |
| (c) City, State, ar | nd ZIP Code | | | | | | | | | |
| Nutley | | | | | NJ | 07110 | ס | | | |
| | | | | | | | | | | |
| | DE | SIGNATIO | N OF OT | | THORIZED | COMMIT | TEES | | | |
| | | | | | ng Representativ | | ILLS | | | |
| I hereby authoriz candidacy. | e the following nan | ned committee, | which is NO | T my princip | al campaign cor | mmittee, to re | eceive and ex | pend funds | on behalf of m | ıy |
| NOTE: This desi | gnation should be f | filed with the pri | ncipal campa | aign commit | ee. | | | | | |
| (a) Name of Con | nmittee (in full) | | | | | | | | | |
| (4) | , | | | | | | | | | |
| | | | | | | | | | | |
| (b) Address (nun | nber and street) | | | | | | | | | |
| | | | | | | | | | | |
| (c) City, State, ar | nd ZIP Code | | | | | | | | | |
| (c) City, State, at | id ZIF Code | | | | | | | | | |
| | | | | | | | | | | |
| 1.00 | which that I have ave | main and their Chair | iamant and to | . the best of | man demonde desa | and haliafit is | | hand same | a fa | |
| | rtify that I have exa | iminea inis Siai | ement and to | ine best of | my knowiedge a | | s true, correct | апа сотрі | ete. | |
| Signature of Candidate | | | | | Date | | | | • | |
| Christopher Monda | | | [Flor | tronically Filed] | 08/19/20 | 08/19/2015 | | | | |
| | | | | [Eite | ironicumy 1 neuj | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| NOTE: Submission | of false, erroneous | , or incomplete | information r | nay subject | the person signi | ng this State | ment to penal | Ities of 2 U. | S.C. §437g. | |
| NOTE: Submission | of false, erroneous | , or incomplete | information r | may subject | the person signi | ng this Stater | ment to penal | Ities of 2 U. | S.C. §437g. | |
| NOTE: Submission | of false, erroneous | , or incomplete | information r | nay subject | the person signi | ng this Stater | ment to penal | Ities of 2 U. | S.C. §437g. | |

FEC FORM 2 (REV. 02/2009)