

# FEC FORM 2

## STATEMENT OF CANDIDACY

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FEC MAIL CENTER

2015 APR 9 AM 9:27

1. (a) Name of Candidate (in full) Lindy Li		2. FEC Candidate Identification Number
(b) Address (number and street) <input type="checkbox"/> Check if address changed 1030 East Lancaster Ave, Suite 807		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code Rosemont, PA 19010		6. State & District of Candidate PA-7
4. Party Affiliation Democrat	5. Office Sought U.S. Congress	

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) Lindy Li for Congress
(b) Address (number and street) 1030 East Lancaster Ave, Suite 807
(c) City, State, and ZIP Code Rosemont, PA 19010

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

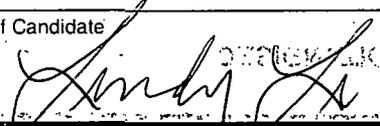
(Including Joint Fundraising Representatives)

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 4/2/2015
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**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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Federal Election Commission  
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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*[Signature]*  
 PREPARER

*4/9/15*  
 DATE PREPARED

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