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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Ryan, Timothy, J., ,					100 111			
	(b) Address (number and street) PO Box189	☐ Check if address changed			Candidate's FEC Identification Number     H2OH17109				
	(c) City, State, and ZIP Code						New	Amended	
	Niles		OH	<del> </del> 4444	-	•	N) OR	(A)	
4.	Party Affiliation	5. Office Soug	jht			rict of Candidate			
	DEMOCRATIC PARTY	House			ОН	13			
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 election(s). (year of election)								
	<b>NOTE:</b> This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full)								
	Tim Ryan for Congress								
	(b) Address (number and street) PO Box 189								
	(c) City, State, and ZIP Code								
	Niles				ОН	44446			
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)  Tim Ryan Victory Fu	ınd							
	(b) Address (number and street) PO Box 83142								
	(c) City, State, and ZIP Code								
	Gaithersburg				MD	20883			
	I certify that I have exa	mined this Sta	tement and to	the best of	my knowledge a	nd belief it is true, correc	ct and comple	te.	
Si	gnature of Candidate					Date			
Ry	van, Timothy, J., ,			[Elec	tronically Filed]	01/07/2019			
NO	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								

FEC FORM 2 (REV. 02/2009)