Image# 29935553615 FEC FORM 2 STATEMENT OF CANDIDACY

LEE M ZELDIN (b) Address (number and stre		Check if address changed	2. Identification Number	
PO BOX 133		Offeck if address changed	H8NY01148	
(c) City, State and ZIP Code	9		3. Is This New	Amendeo
SHIRLEY	NY	11967	Statement X (N) OR	(A)
. Party Affiliation	5. Office Sought	6. State & Di	strict of Candidate	
REPUBLICAN PARTY	House	NY 0 ⁻		
	DESIGNATION OF PR		22/2	
I hereby designate the following r	named political committee as my	Principal Campaign Committee	e for the <u>2010</u> election(s) (year of election)	
NOTE: This designation shou	Id be filed with the appropriate	office listed in the instruction	S.	
(a) Name of Committee (in fu	ll)			
LEE ZELDIN FOR CONC	GRESS			
(b) Address (number and stre	eet)			
PO BOX 133				
(c) City, State and ZIP Code	9			
		Joint Fundraising Representa		of my
I hereby authorize the following n candidacy.	DESIGNATION OF OT	THER AUTHORIZED C Joint Fundraising Representa my principal campaign commit	tives)	of my
I hereby authorize the following n candidacy.	DESIGNATION OF OT (Including C named committee, which is NOT	THER AUTHORIZED C Joint Fundraising Representa my principal campaign commit	tives)	of my
I hereby authorize the following n candidacy. NOTE: This designation shou	DESIGNATION OF OT (Including named committee, which is NOT and be filed with the principal ca	THER AUTHORIZED C Joint Fundraising Representa my principal campaign commit	tives)	of my
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I hereby authorize the following n candidacy. NOTE: This designation shou (a) Name of Committee (in fu (b) Address (number and stre (c) City, State and ZIP Code I certify that I hav ignature of Candidate EE M ZELDIN	DESIGNATION OF OT (Including named committee, which is NOT and be filed with the principal ca all) eet)	THER AUTHORIZED C Joint Fundraising Representa my principal campaign commit mpaign committee.	tives) tee, to receive and expend funds on behalf of e and belief it is true, correct, and comp Date 03/25/2009	lete.
I hereby authorize the following n candidacy. NOTE: This designation shou (a) Name of Committee (in fu (b) Address (number and stre (c) City, State and ZIP Code I certify that I hav Signature of Candidate LEE M ZELDIN	DESIGNATION OF OT (Including named committee, which is NOT and be filed with the principal ca all) eet)	THER AUTHORIZED C Joint Fundraising Representa my principal campaign commit mpaign committee.	tives) tee, to receive and expend funds on behalf of e and belief it is true, correct, and comp Date	lete.