

Image# 201812039133906633

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Kildee, Daniel, T., ,		2. Candidate's FEC Identification Number H2MI05119
(b) Address (number and street) <input type="checkbox"/> Check if address changed 6450 Flagstone Ct.		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code Flushing MI 48433		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate MI 05

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)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Friends of Dan Kildee	
(b) Address (number and street) P.O. Box 248	
(c) City, State, and ZIP Code Flint MI 48501	

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 Kildee, Daniel, T., , <i>[Electronically Filed]</i>	Date 11/07/2018
--	--------------------

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--