FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						_	
	Ms. Cynthia Richetta DeLeonardo							
	(b) Address (number and street) 46 Glen Oley Drive	☐ Check if address changed				Candidate's FEC Identification Number P60022019		
	(c) City, State, and ZIP Code	ty, State, and ZIP Code				3. Is This New Amended		
	Reading	PA 19606			06	Statement X (N) OR (A)		
4.	Party Affiliation	5. Office Soug	jht		6. State & Dist	rict of Candidate	_	
	DEMOCRATIC PARTY	President	ial					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full)							
Cynthia DeLeonardo								
	(b) Address (number and street) 46 Glen Oley Drive							
	(c) City, State, and ZIP Code							
	Reading				PA	19606		
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						_	
		mined this Sta	tement and t	to the best o	f my knowledge a	nd belief it is true, correct and complete.		
Signature of Candidate						Date		
M	ls. Cynthia Richetta DeLeonardo			[Ele	ctronically Filed]	07/04/2016		
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)