

Image# 12954206881

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) <b>Mr. RANDOLPH ALTSCHULER</b>			2. Candidate's FEC Identification Number <b>HONY01129</b>	
(b) Address (number and street) <b>PO BOX 657</b>		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code <b>STONY BROOK NY 11790</b>		3. Is This Statement <input type="checkbox"/> New (N) <b>OR</b> <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation <b>REPUBLICAN PARTY</b>	5. Office Sought <b>House</b>	6. State & District of Candidate <b>NY 01</b>		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 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) <b>RANDY ALTSCHULER FOR CONGRESS</b>		
(b) Address (number and street) <b>PO BOX 657</b>		
(c) City, State, and ZIP Code <b>STONY BROOK NY 11790</b>		

### 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>Young Guns 2012 Round 1 (Joint Fundraising Representative)</b>		
(b) Address (number and street) <b>228 South Washington Street Suite 115</b>		
(c) City, State, and ZIP Code <b>Alexandria VA 22314</b>		

*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 <b>Mr. RANDOLPH ALTSCHULER</b>  <i>[Electronically Filed]</i>	Date <b>09/26/2012</b>
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**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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Form/Schedule: F2A  
Transaction ID :

This is an amended Form 2

Form/Schedule:  
Transaction ID:

# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

Long Island Victory Fund

(b) Address (number and street)

2470 Daniell's Bridge Rd Ste. 121

(c) City, State and ZIP Code

Athens

GA

30606

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[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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