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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Cartwright, Matthew, A., ,		haaliif1-2			O Condidate!- FFO!!	notification bl	unah a s	
	(b) Address (number and street) PO Box 414	☐ Check if address changed			Candidate's FEC Identification Number     H2PA17079				
	(c) City, State, and ZIP Code						lew	Amended	
	Scranton		P/	1850		`	N) OR	(A)	
4.	Party Affiliation DEMOCRATIC PARTY	5. Office Soug House	ht		6. State & Distr	rict of Candidate 08			
	DEMOCRATIC PARTY	nouse			FA				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full)								
Cartwright for Congress									
	(b) Address (number and street) PO Box 414								
	1 O BOX 414								
	(c) City, State, and ZIP Code								
	Scranton				PA	18501			
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)									
(a) City State and ZID Code									
(c) City, State, and ZIP Code									
	I certify that I have exa	mined this Stat	ement and to	the best of	my knowledge a	and belief it is true, correc	t and comple	te.	
Signature of Candidate Date									
$C_{i}$	artwright, Matthew, A., ,	[Electronically Filed]				11/21/2022			
				12.00					
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)