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## FEC FORM 2

## STATEMENT OF CANDIDACY

_										
1.	(a) Name of Candidate (in full)									
	DeCecco, andrew, frank, ,  (b) Address (number and street)	Charles and an arrange				2 Candidat	to's EEC Ido	otification N	lumbor	
	68 leonard st	☐ Check if address changed				Candidate's FEC Identification Number     H4NY01147				
	(c) City, State, and ZIP Code					3. Is This		ew	Amended	
	wading river	NY 11792			Statem	,	l) OR	(A)		
4.	Party Affiliation	5. Office Soug				trict of Candid	late			
	DEMOCRATIC PARTY	House			NY	01				
	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)									
	Andrew DeCecco									
	(b) Address (number and street)									
	68 leonard st									
	(c) City, State, and ZIP Code									
	wading river				NY	11792				
	DI	ESIGNATIO	N OF OT	HER AU	THORIZED	COMMIT	TEES			
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										
σ.	candidacy.	mea committee	, which is NO	г ту ртпстра	ai campaign coi	mmillee, to rec	ceive and ex	pena runas	s on benail of my	
NOTE: This designation should be filed with the principal campaign committee.										
(a) Name of Committee (in full)										
	Andy									
	(b) Address (number and street)									
	68 leonard st									
	(c) City, State, and ZIP Code									
	wading river				NY	11792				
	wading fiver				141	11732				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.										
Si	Signature of Candidate									
DeCecco, Andy, Frank, ,						08/12/2023				
D	есессо, Апау, Гтапк, ,					00/12/202	23			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										
	DIE: Submission of false, erroneous	s, or incomplete	IIIIOIIIIalioii II	lay Subject ti	ne person signi	ing this Statem	nent to penai	ties of 2 U.	S.C. §437g.	
	DIE: Submission of false, erroneous	s, or incomplete	Illioilliation	lay subject to	ne person signi	ing this Statem	nent to penal	ties of 2 U.	S.C. §437g.	
	DIE: Submission of false, erroneous	s, or incomplete	mormation	lay subject to	he person signi	ing this Statem	nent to penai	ties of 2 U.	S.C. §437g.	

FEC FORM 2 (REV. 02/2009)