

Image# 202508229789795017

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Solomon, Gavin, , ,			2. Candidate's FEC Identification Number H6MA07184	
(b) Address (number and street) 401 E 34th Street S11P		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code New York		NY	10016	3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate MA 07		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2025 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) GS CONSTITUTIONAL AFFIANT - TWU GUILTY DEBTOR & SHADOW BANKER REFORM PAC		
(b) Address (number and street) 110 COVES RUN		
(c) City, State, and ZIP Code SYOSSET NY 11791		

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 Solomon, Gavin, , ,	Date 08/22/2025
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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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