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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Rivera, Carlina, , ,								
	Address (number and street)					Candidate's FEC Identification Number H2NY10324			
_	c) City, State, and ZIP Code						ew Amen	ded	
	New York NY 10009				9	Statement X (1	N) OR (A)		
4.	Party Affiliation	5. Office Soug	jht		6. State & Distr	rict of Candidate			
	DEMOCRATIC PARTY	House			NY	10			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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) CARLINA FOR NEW YORK									
	(b) Address (number and street)								
	245 E 25TH ST								
	18C								
	(c) City, State, and ZIP Code								
	NEW YORK				NY	10010			
 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 to	the best of	my knowledge a	and belief it is true, correc	t and complete.		
	gnature of Candidate					Date			
Ri	ivera, Carlina, , ,	[Electronically Filed]				06/02/2022			
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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FEC FORM 2 (REV. 02/2009)