FEC FORM 2 STATEMENT OF CANDIDACY

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1	(a) Name of Candidate (in full)										
۱.	Foti, Daniel, Peter, ,										
	(b) Address (number and street) 29 Willow wood Drive	□ Check if address changed				2. Candidate's FEC Identification Number H4NY03267					
	(c) City, State, and ZIP Code	e. and ZIP Code					s Ne	5W	_	Amended	
	East Setauket	NY 11733				3. Is Thi Stater			×	(A)	
4.	Party Affiliation	5. Office Soug	ht		6. State & Dis	trict of Candi	date				
	CONSERVATIVE 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(s).										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)										
DANIEL PETER FOTI											
	(b) Address (number and street)										
	29 WILLOW WOOD DRIVE										
	(c) City, State, and ZIP Code										
	EAST SETAUKET				NY	1173	3				
 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 pri	ncipal campa	aign committ	ee.						
	(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 Date											
F	Toti, Daniel, Peter, ,	12/04/20	123								
N	OTE: Submission of false, erroneou	s, or incomplete	information r	nay subject t	he person signi	ing this State	ment to penal	ties of 2 U.	S.C. §4	37g.	
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