

Image# 202307269584048062

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Gerald, Michael, Bernard, Dr.,			2. Candidate's FEC Identification Number H4NY16061	
(b) Address (number and street) 15 Wallace Street		<input checked="" type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Tuckahoe NY 10707		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate NY 16		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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) MICHAEL GERALD FOR CONGRESS		
(b) Address (number and street) 15 WALLACE STREET		
(c) City, State, and ZIP Code TUCKAHOE NY 10707		

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 Gerald, Michael, Bernard, Dr., <i>[Electronically Filed]</i>	Date 07/26/2023
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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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