

Image# 201705089053508088

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) CAPUANO, MICHAEL E, , ,			2. Candidate's FEC Identification Number H8MA08071	
(b) Address (number and street) 172 CENTRAL ST PO BOX 440305		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code SOMERVILLE MA 02145		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation Dem	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 2018 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) CAPUANO FOR CONGRESS COMMITTEE		
(b) Address (number and street) PO BOX 440305		
(c) City, State, and ZIP Code SOMERVILLE MA 02144		

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) CAPUANO FOR CONGRESS COMMITTEE		
(b) Address (number and street) PO BOX 440305		
(c) City, State, and ZIP Code SOMERVILLE MA 02144		

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 CAPUANO, MICHAEL E, , , <i>[Electronically Filed]</i>	Date 05/08/2017
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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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