

Image# 201608049022177092

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Colleen Deacon			2. Candidate's FEC Identification Number H6NY24177	
(b) Address (number and street) 118 Julian Pl #208		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Syracuse NY 13210		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 24		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) Colleen Deacon for Congress		
(b) Address (number and street) 118 Julian Pl #208		
(c) City, State, and ZIP Code Syracuse NY 13210		

### 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) Deacon Victory Fund		
(b) Address (number and street) 118 Julian Pl #208		
(c) City, State, and ZIP Code Syracuse NY 13210		

*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 Colleen Deacon  <i>[Electronically Filed]</i>	Date 08/04/2016
---	--------------------

**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--