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STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full) GROSZ, CINDY, , ,							
	(b) Address (number and street) P.O. BOX 525	☐ Check if address changed				Candidate's FEC Identification Number H0NY04149		
	(c) City, State, and ZIP Code						ew Amended	
	HEWLETT		NY	1155	7	Statement X (N		
4.	Party Affiliation	5. Office Soug	ht		6. State & Distr	rict of Candidate		
	REPUBLICAN PARTY	House			NY	04		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) CINDY GROSZ FOR CONGRESS								
	(b) Address (number and street) P.O. BOX 525							
	(c) City, State, and ZIP Code							
	HEWLETT				NY	11557		
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								
0.	candidacy.	ied committee,	WITIGIT IS INO	т тту рттыр	ai campaigh con	minitiee, to receive and ex	pend funds on benail of my	
	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						Date		
G	ROSZ, CINDY, , ,	[Electronically Filed]			tronically Filed]	02/26/2020		
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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