

HAND DELIVERED

**FEC FORM 2**  
**STATEMENT OF CANDIDACY**

RECEIVED  
FEC MAIL CENTER

2019 JUL 29 AM 11:36

1. (a) Name of Candidate (in full) <u>Frank Acosta</u>			2. FEC Candidate Identification Number
(b) Address (number and street) <u>49406 N. GALICIED</u>		<input type="checkbox"/> Check if address changed	
(c) City, State, and ZIP Code <u>NorDmille, MI 48168</u>		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)	
4. Party Affiliation <u>Republican</u>	5. Office Sought <u>House of Reps</u>	6. State & District of Candidate <u>11th District Michigan</u>	

**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) <u>Frank Acosta 2020</u>
(b) Address (number and street) <u>49406 N. GALICIED</u>
(c) City, State, and ZIP Code <u>NorDmille, MI 48168</u>

**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 <u>Frank Acosta</u>	Date <u>7-29-19</u>
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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NOTED ON NOV 11 1966

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