

5301 W TOUHY
SKOKIE, IL 60077
PHONE (847) 983-8777
FAX (847) 983-8795
MICHEAL2008.COM

**CITIZENS FOR
MICHAEL BENJAMIN
YOUNAN**

Fax

To: Rebecca Hough **From:** Citizens for Michael Benyamin Younan
Fax: 202-219-0174 **Pages:** 2
Phone: 800 424 9530 **Date:** 08/20/2008
Re: **cc:**

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

• **Comments:**

28039820118

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) <u>Michael Benjamin Younan</u>		2. Identification Number <u>H81L09158</u>
(b) Address (number and street) <u>5301 W Touhy</u>		3. Is This Statement ☐ New (N) OR ☒ Amended (A)
(c) City, State, and ZIP Code <u>SKOKIE IL 60077</u>		
4. Party Affiliation <u>Republican</u>	5. Office Sought <u>U.S. Congress</u>	6. State & District of Candidate <u>ILLINOIS DISTRICT 9 (Ninc)</u>

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2008 election(s).
(year of election)

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) <u>Citizens For Michael Benjamin Younan</u>
(b) Address (number and street) <u>5301 W Touhy</u>
(c) City, State, and ZIP Code <u>SKOKIE IL 60077</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

DECLARATION OF INTENT TO EXPEND PERSONAL FUNDS (House or Senate Only)

9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) by

9A		for the primary election, and
9B		for the general election.

If you do not intend to expend personal funds exceeding the threshold amount for either election, you must enter "0.00" for each.

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 <u>8-20-08</u>
---	------------------------

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

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

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	Date of Receipt
☐ USPS First Class Mail	Postmarked
☐ USPS Registered/Certified	Postmarked (R/C)
☐ USPS Priority Mail	Postmarked Delivery Confirmation™ Label ☐
☐ USPS Express Mail	Postmarked
☐ Postmark Illegible	
☐ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☒ Other (Specify):	Date of Receipt or Postmarked

The document preceding this page was received by FAX at the FEC. The receiving FAX machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.

N/A
PREPARER
(5/2004)

N/A
DATE PREPARED

28039820120