## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Maron, Maud, , ,						
	(b) Address (number and street) 22 Wooster Street Apt. 4N	☐ Check if address changed				Candidate's FEC Identification Number     H2NY10159	
	(c) City, State, and ZIP Code					3. Is This N	ew Amended
	New York		NY	1001	3	Statement (N	I) OR (A)
4.	Party Affiliation	5. Office Soug	nt		6. State & Dist	rict of Candidate	
	DEMOCRATIC PARTY	House			NY	10	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE							
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)						
	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
(a) Name of Committee (in full)  FRIENDS OF MAUD							
	(b) Address (number and street) 22 WOOSTER STREET 4C						
-	(c) City, State, and ZIP Code						
	NEW YORK				NY	10013	
<ul> <li>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.</li> <li>NOTE: This designation should be filed with the principal campaign committee.</li> <li>(a) Name of Committee (in full)</li> <li>(b) Address (number and street)</li> </ul>							
	(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.							
	gnature of Candidate	[Electronically Filed]				Date	
M	aron, Maud, , ,					06/28/2022	
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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