FEC FORM 2 STATEMENT OF CANDIDACY

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1.	(a) Name of Candidate (in full)										
	Flanagan, Tricia, , , (b) Address (number and street) □ Check if address changed						2. Candidate's FEC Identification Number				
	2489 Main Street					H2NJ03233					
	(c) City, State, and ZIP Code					3. Is Thi	S	New		Amended	
	Lawrenceville							(N) O	R ×	(A)	
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist		date				
	REPUBLICAN PARTY	House			NJ	04					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the <u>2022</u> 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) COMMITTEE TO ELECT TRICIA FLANAGAN											
	(b) Address (number and street) 2489 MAIN STREET										
	(c) City, State, and ZIP Code										
	LAWRENCEVILLE				NJ	0864	8				
(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 exa	mined this Stat	ement and to	the best o	^f my knowledge a	nd belief it is	s true, corre	ect and co	mplete.		
Sig	nature of Candidate					Date					
Fla	ınagan, Tricia, , Ms,			[Ele	ctronically Filed]	01/20/20)22				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											
L							1			M 2 (REV. 02/2009)	