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FEC FORM 2

STATEMENT OF CANDIDACY

=												
1.	(a) Name of Candidate (in fu	II)										
	Garbarino, Andrew, , , (b) Address (number and stre	not)	☐ Check if address changed					2. Condidate's FFC Identification Number				
	234 Fairview Ave	eet)		neck ii addre		2. Candidate's FEC Identification Number H0NY02234						
	(c) City, State, and ZIP Code					3. Is This			X (A)	led		
	Bayport		VA 11705			Staten		OR OR	X (A)			
4.	Party Affiliation		5. Office Soug	jht		6. State & Dis	trict of Candid	date				
	REPUBLICAN PARTY		House			INI	02					
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election)											
	NOTE: This designation sho	uld be fi	led with the ap	propriate offi	ce listed in th	ne instructions.						
	(a) Name of Committee (in fu	ıll)										
	Garbarino for C	ongr	ess									
	(b) Address (number and stre	eet)										
	PO Box 101											
	(c) City, State, and ZIP Code	1										
	Bayport					NY	11705	5				
		DE	CICNATIO	N OF OT	UED ALIZ	LIODIZED	COMMIT	TEEC				
		DE				THORIZED g Representativ		IEES				
			·				,					
8.	I hereby authorize the follow candidacy.	ing nam	ed committee	which is NO	Γ my principa	al campaign co	mmittee, to re	eceive and exp	end fund	ls on behalf of m	ıy	
	NOTE: This designation should be filed with the principal campaign committee.											
	(a) Name of Committee (in fu	ıll)										
GARBARINO VICTORY FUND												
	(b) Address (number and stre	eet)										
	PO BOX 101											
	(c) City, State, and ZIP Code											
	BAYPORT					NY	11705					
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 ·					
Garbarino, Andrew, , ,						02/20/2025						
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.												

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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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) GROW THE MAJORITY NY									
	(b) Address (number and street) 228 S WASHINGTON ST STE 115									
	(c) City, State, and ZIP Code ALEXANDRIA VA 22314									
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	_								
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)	<i>'</i>								
	(b) Address (number and street)	_								
	(c) City, State, and ZIP Code	_								
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									