

**Spotorno for America**  
**21 Hilltop Drive**  
**Mahopac, NY 10541**

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FEC MAIL CENTER  
2016 MAR -3 AM 11:36

FEC

Attn.: Jill Sugarman

Please be advised that Frank Spotorno, who was a candidate for U.S. Senate from New York and filed with the FEC for that office, is no longer a candidate for U.S. Senate, but is now a candidate for the House of Representatives in NY-District 14.

Enclosed please find an amended Form 1 and a new Form 2. It is my understanding that moving forward, we will be filing all forms electronically because we have passed over the \$50,000 threshold.

Sincerely,

Daniel J. Murphy

Treasurer

914-714-4370 [\\_djmyanks@gmail.com](mailto:djmyanks@gmail.com)

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# FEC FORM 2

## STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) <b>FRANK SPOTORNO</b>		2. FEC Candidate Identification Number
(b) Address (number and street) <input type="checkbox"/> Check if address changed <b>35 STILLWELL AVENUE</b>		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code <b>YONKERS, NY 10704</b>		4. Party Affiliation <b>REPUBLICAN</b>
5. Office Sought <b>HOUSE</b>	6. State & District of Candidate <b>NY-14</b>	

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) <b>SPOTORNO FOR AMERICA</b>
(b) Address (number and street) <b>21 HUNTER DRIVE</b>
(c) City, State, and ZIP Code <b>MAHOPAC NY 10541</b>

### 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 	Date <b>3/2/16</b>
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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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PREPARER  
(3/2015)

*MP*

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