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Image# 201801129090398194

FEC FORM 2

STATEMENT OF CANDIDACY

_	() 11 (((((((((((((((((
1.	(a) Name of Candidate (in full)						
	Ronan, Samuel, , ,		haali if addus			2 Candidate's FFC Identification Number	
	(b) Address (number and street) 237 Creekside Drive		heck if addres	ss changed		Candidate's FEC Identification Number H6OH01088	
	(c) City, State, and ZIP Code					3. Is This New Amended	
	Springboro		OH	4506	6	Statement (N) OR (A)	
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	rict of Candidate	
	REPUBLICAN PARTY	House			ОН	01	
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE						
7.	I hereby designate the following nar	med political co	mmittee as m	y Principal (Campaign Comn	nittee for the 2018 (year of election) election(s).	
	NOTE: This designation should be f	iled with the ap	propriate offic	ce listed in th	ne instructions.		
	(a) Name of Committee (in full) SAM RONAN FOR	CONGRE	SS				
	(b) Address (number and street) 237 CREEKSIDE DR						
	(c) City, State, and ZIP Code						
	SPRINGBORO				ОН	45066	
	DE				THORIZED g Representative	COMMITTEES es)	
8.	I hereby authorize the following name candidacy.	ned committee,	which is NO	Γ my principa	al campaign con	nmittee, to receive and expend funds on behalf of my	
	NOTE: This designation should be f	iled with the pri	ncipal campa	ign committe	ee.		
	(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 of	my knowledge a	and belief it is true, correct and complete.	
Sig	I certify that I have exa	mined this Stat	ement and to	the best of	my knowledge a	and belief it is true, correct and complete. Date	
		mined this Stat	ement and to		my knowledge a		
Ro	gnature of Candidate onan, Samuel, , ,			[Elect	ronically Filed]	Date	
Ro	gnature of Candidate onan, Samuel, , ,			[Elect	ronically Filed]	Date 01/12/2018	

FEC FORM 2 (REV. 02/2009)