

Image# 201811109133644238

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) maynard, andrew, j, ,		
(b) Address (number and street) 619 northbroadway		☐ Check if address changed
(c) City, State, and ZIP Code georgetown KY 40324		2. Candidate's FEC Identification Number S0KY00289
4. Party Affiliation DEMOCRATIC PARTY		3. Is This Statement ☒ New (N) OR ☐ Amended (A)
5. Office Sought Senate		6. State & District of Candidate KY 00

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) andrew maynard for senate		
(b) Address (number and street) 619 north broadway		
(c) City, State, and ZIP Code georgetown KY 40324		

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 maynard, andrew, , , [Electronically Filed]	Date 11/10/2018
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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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