

Image# 201904229149578244

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) HOMRICH, LYNNE, , ,			2. Candidate's FEC Identification Number HOGA07224	
(b) Address (number and street) PO BOX 25006		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code ATLANTA		GA 30325		
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House		6. State & District of Candidate GA 07
		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		

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) HOMRICH FOR CONGRESS			
(b) Address (number and street) PO BOX 25006			
(c) City, State, and ZIP Code ATLANTA		GA 30325	

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 HOMRICH, LYNNE, , , <i>[Electronically Filed]</i>	Date 04/22/2019
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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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