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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)					·		
	Cornicelli, Robert, Michael, CP	-						
	(b) Address (number and street)					Candidate's FEC Identification Number H2NY01158		
	(c) City, State, and ZIP Code					3. Is This N	ew Amended	
	Saint James		NY	1178	0	Statement (N	I) OR (A)	
4.	Party Affiliation	5. Office Sough	nt		6. State & Dist	rict of Candidate		
	REPUBLICAN PARTY	House			NY	02		
	DE	SIGNATIO	N OF PRI	NCIPAL	CAMPAIGN	N COMMITTEE		
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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) CORNICELLI FOR CONGRESS								
	(b) Address (number and street) 27 SUNNY ROAD							
	(c) City, State, and ZIP Code							
	SAINT JAMES				NY	11780		
(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							
		mined this State	ement and to	the best of	my knowledge a	nd belief it is true, correct	and complete.	
Signature of Candidate Date								
C	ornicelli, Robert, Michael, CPT,	[Electronically Filed]				02/28/2022		
NO	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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