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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Howe, Robert, Alan, ,		
(b) Address (number and street) 528 N. Bedford St. <input type="checkbox"/> Check if address changed		2. Candidate's FEC Identification Number H8PA11053
(c) City, State, and ZIP Code Carlisle PA 17013		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate PA 10

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) HOWE FOR PA 11		
(b) Address (number and street) 528 N. BEDFORD ST.		
(c) City, State, and ZIP Code CARLISLE PA 17013		

### 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) NEPA for Howe		
(b) Address (number and street) 19 Revere Road		
(c) City, State, and ZIP Code Mountain Top PA 18707		

*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 Howe, Robert, Alan, ,  <i>[Electronically Filed]</i>	Date 03/07/2018
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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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