

Image# 202301289575117270

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Lehman, Matthew, , ,			2. Candidate's FEC Identification Number H2KY04212	
(b) Address (number and street) PO Box 72441		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Newport KY 41072		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 KY 04		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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) Citizens for Matthew Lehman		
(b) Address (number and street) PO Box 72441		
(c) City, State, and ZIP Code Newport KY 41072		

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) Lehman for Kentucky		
(b) Address (number and street) PO Box 72441		
(c) City, State, and ZIP Code Newport KY 41072		

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 Lehman, Matthew, , , <i>[Electronically Filed]</i>	Date 01/28/2023
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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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