

Image# 202404019627435306

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Akhlaghy, Nader, , Dr, / Akhlaghy, Amirhossein, , ,			2. Candidate's FEC Identification Number P40007304		
(b) Address (number and street) 67 WallSt		<input type="checkbox"/> Check if address changed			
(c) City, State, and ZIP Code New York		NY	10005	3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)	
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought Presidential		6. State & District of Candidate NY 00	

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) COMMITTEE 300		
(b) Address (number and street) 67 WALLST		
(c) City, State, and ZIP Code NEW YORK NY 10005		

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) COMMITTEE 300		
(b) Address (number and street) 67 WALLST		
(c) City, State, and ZIP Code NEW YORK NY 10005		

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 AKHLAGHY, NADER, , DR,	Date 04/01/2024
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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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Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

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)

NADER AKHLAGHY

(b) Address (number and street)

67 WALLST.MANHATTAN,NY

(c) City, State, and ZIP Code

NEWYORK

NY

10005

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

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

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