

Image# 202210019532011342

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Castelli, Matt, , ,			2. Candidate's FEC Identification Number H2NY21164	
(b) Address (number and street) PO Box 2451		<input checked="" type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Glens Falls NY 12801		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 NY 21		

DESIGNATION OF PRINCIPAL CAMPAIGN 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) Castelli for Congress		
(b) Address (number and street) PO Box 2451		
(c) City, State, and ZIP Code Glens Falls NY 12801		

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) Castelli Victory Fund		
(b) Address (number and street) PO Box 15320		
(c) City, State, and ZIP Code Washington DC 20003		

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 Castelli, Matt, , , <i>[Electronically Filed]</i>	Date 10/01/2022
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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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