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PAGE 1 / 2

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Carrozza, Albert, Kenneth, ,			2. Candidate's FEC Identification Number P60023439		
(b) Address (number and street) 46 Narragansett Avenue			☐ Check if address changed		
(c) City, State, and ZIP Code Medford NY 11763			3. Is This Statement ☒ New (N) OR ☐ Amended (A)		
4. Party Affiliation W		5. Office Sought Presidential		6. State & District of Candidate	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) Albert Kenneth Carrozza Llc.		
(b) Address (number and street) 46 Narragansett Avenue		
(c) City, State, and ZIP Code Medford NY 11763		

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)		
(b) Address (number and street)		
(c) City, State, and ZIP Code		

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 Carrozza, Albert, Kenneth, , [Electronically Filed]	Date 10/18/2016
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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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FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F2N

Transaction ID :

I will soon have my updated prepared presidential site. Donations will be accessible.

Form/Schedule:

Transaction ID: