FEC FORM 2 STATEMENT OF CANDIDACY

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A (-) Norse of Osterlidete (in full)							
1. (a) Name of Candidate (in full)							
Cummings, John, C., ,							
(b) Address (number and street) 246 Bowne Street. Apt B				2. Candidate's FEC Identification Number			
				H0NY14 3. Is This			A ma a m d a d
(c) City, State, and ZIP Code Bronx	-				ent 🗶 Ne		Amended (A)
4. Party Affiliation		1 1040	6. State & Distr				(~)
4. Party Anniation REPUBLICAN PARTY	5. Office Sought House		NY	14	ale		
REFOREICAN FARTI	110036			14			
DE	SIGNATION OF PR	INCIPAL	CAMPAIGN		TEE		
7. I hereby designate the following nan	ned political committee as n	ny Principal (Campaign Comm		2020 (year of elect		on(s).
NOTE: This designation should be f	iled with the appropriate off	ice listed in th	ne instructions.				
(a) Name of Committee (in full)							
CUMMINGS FOR C	ONGRESS						
(b) Address (number and street) 47 FLINTLOCK DRIVE							
(c) City, State, and ZIP Code							
SHIRLEY			NY	11967			
 8. I hereby authorize the following name candidacy. NOTE: This designation should be find the find the				nmittee, to rec	eive and exp	end funds	on behalf of my
(c) City, State, and ZIP Code							
I certify that I have exa	mined this Statement and to	o the best of	my knowledge a	nd belief it is t	true, correct	and compl	ete.
Signature of Candidate				Date			
Cummings, John, C., , [Electronically Filed]				07/23/2019			
NOTE: Submission of false, erroneous,	or incomplete information r	nay subject t	he person signin	g this Statem	ent to penalt	ies of 2 U.	S.C. §437g.
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