

Image# 202409269684728363

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) DEsposito, Anthony, P, ,			2. Candidate's FEC Identification Number H2NY04277	
(b) Address (number and street) PO Box 188		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Island Park NY 11558		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate NY 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) D"Esposito for New York		
(b) Address (number and street) PO Box 188		
(c) City, State, and ZIP Code Island Park NY 11558		

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) DEsposito Victory Fund		
(b) Address (number and street) PO Box 183		
(c) City, State, and ZIP Code Hudson WI 54016		

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 DEsposito, Anthony, , ,	Date 09/26/2024
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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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of Additional Authorized CommitteesPage 2 of 6

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)

NEW YORK MAJORITY MAKERS

(b) Address (number and street)

PO BOX 183

(c) City, State, and ZIP Code

HUDSON

WI

54016

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)

SCALISE LEADERSHIP FUND 2024

(b) Address (number and street)

320 1ST ST SE

(c) City, State, and ZIP Code

WASHINGTON

DC

20003

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)

TAKE BACK NY-04 REPUBLICAN NOMINEE FUND 2022

(b) Address (number and street)

PO BOX 30844

(c) City, State, and ZIP Code

BETHESDA

MD

20824

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)

EMMER MAJORITY BUILDERS

(b) Address (number and street)

824 S. MILLEDGE AVE. STE. 101

(c) City, State, and ZIP Code

ATHENS

GA

30605

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of Additional Authorized CommitteesPage 3 of 6

FEC Form 2S (Revised 02/2017)

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

PROTECT THE HOUSE 2024

(b) Address (number and street)

PO Box 30844

(c) City, State, and ZIP Code

Bethesda

MD

20824

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)

HISPANIC LEADERSHIP TRUST PARTNERSHIP

(b) Address (number and street)

1005 CONGRESS AVE
STE 400

(c) City, State, and ZIP Code

AUSTIN

TX

78701

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)

AMERICAN BATTLEGROUND FUND

(b) Address (number and street)

PO BOX 30844

(c) City, State, and ZIP Code

BETHESDA

MD

20824

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)

GROWING THE MAJORITY THROUGH NY

(b) Address (number and street)

1305 W 11TH ST
213

(c) City, State, and ZIP Code

HOUSTON

TX

77008

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FEC Form 2S (Revised 02/2017)

DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

NRCC NEW YORK VICTORY

(b) Address (number and street)

228 S. WASHINGTON STREET
SUITE 115

(c) City, State, and ZIP Code

ALEXANDRIA

VA

22314

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)

PROTECT THE HOUSE NEW YORK 2024

(b) Address (number and street)

PO BOX 30844

(c) City, State, and ZIP Code

BETHESDA

MD

20824

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)

NY VICTORY FUND 2024

(b) Address (number and street)

320 FIRST STREET SE

(c) City, State, and ZIP Code

WASHINGTON

DC

20003

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)

LALOTA VICTORY FUND

(b) Address (number and street)

PO BOX 183

(c) City, State, and ZIP Code

HUDSON

WI

54016

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FEC Form 2S (Revised 02/2017)

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

PFRIENDS OF PFLUGER

(b) Address (number and street)

PO BOX 30844

(c) City, State, and ZIP Code

BETHESDA

MD

20824

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(a) Name of Committee (in full)

GROWING THE MAJORITY THROUGH NY

(b) Address (number and street)

1305 W 11TH ST
213

(c) City, State, and ZIP Code

HOUSTON

TX

77008

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)

NRCC NEW YORK VICTORY

(b) Address (number and street)

228 S. WASHINGTON STREET
SUITE 115

(c) City, State, and ZIP Code

ALEXANDRIA

VA

22314

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(a) Name of Committee (in full)

GROW THE MAJORITY NY

(b) Address (number and street)

228 S WASHINGTON ST STE 115

(c) City, State, and ZIP Code

ALEXANDRIA

VA

22314

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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)

GROW THE MAJORITY

(b) Address (number and street)

228 S WASHINGTON ST STE 115

(c) City, State, and ZIP Code

ALEXANDRIA

VA

22314

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)

New Yorkers for Common Sense

(b) Address (number and street)

228 S Washington St.
Ste. 115

(c) City, State, and ZIP Code

Alexandria

VA

22314

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