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FACSIMILE TRANSMISSION

DATE: NO. OF PAGES (including cover):

TO: FEC FROM: Benjamin A. Khanna

COMPANY: PHONE: (631)286-2400 Ext. 219

FAX #: (631)286-4173

PHONE NO .: 202-219-0174E-MAIL: FAX NO .: RE:

o Urgent o Awaiting your comments o As discussed o Per your request

o As discussed o Per your request o Please call upon receipt o Please reply ASAP

o For your information

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FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of,Candidate (in full)							1	
Benjamin Antonio Khanna								
(b) Address (number and street)			2	2. FEC Candidate Identification Number				
685 Brockhave	in Ax			-				
(c) City, State, and ZIP Code			3.	. Is This Stateme	nt X (N)	W OR	Amended : (A)	
	1713	10.6	Nada B District				Falson: (V.)	
4. Party Affiliation	5. Office Sought President	6. 8	State & District	OT Candida	18			
	110010011						······································	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7. I hereby designate the following named political committee as my Principal Campaign Committee for the								
NOTE: This designation should be filed with the appropriate office listed in the instructions. (year of election)								
(a) Name of Committee (in full)								
Benjamin Antonio Khanna for President (1) Address (number and street)								
685 Brookhaven Av								
(c) City, State, and ZIP Code								
Bellport Ny	11713							
DE	SIGNATION OF OT	HER AUTHO	RIZED CO	тлимс	EES			
	(Including Join	nt Fundralsing Re	presentatives)					
8. I hereby authorize the following nar	ned committee, which is NO	T my principal ca	mpaign commit	ttee, to rece	ive and exp	end fund:	on behalf of my	
candidacy.								
NOTE: This designation should be	filed with the principal camp	algn committee.						
(a) Name of Committee (in full)								
·								
(b) Address (number and street)								
(a) . wan now fram the off add								
·								
(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			Dε	ate /				
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Denjamin Ac	itorio Ki	~nna		7/	<i>ا</i> ا ک	15		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.								
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v wyseu							EC FORM 2 (REV. 02/2009	

Via FAX

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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(8/2013)