Image# 202310159598025383 PAGE 1 / 1

## FEC FORM 2

## STATEMENT OF CANDIDACY

| 1.  | (a) Name of Candidate (in full)   |  |               |             |                |   |  |  |
|---|---|--|---------------|-------------|----------------|---|--|--|
|   | LINDERMAN, HANK, , ,  (b) Address (number and street)   |  |               |             |                | 2. Candidate's FEC Identification Number      |  |  |
|   | 1182 PARADISE ACRES ROAD  |  | moon ii aaaro | oo onangoa  |                | H8KY02080                                     |  |  |
|   | (c) City, State, and ZIP Code   |  | 10            | / 4011      | 0              | 3. Is This New Amended Statement X (N) OR (A) |  |  |
|   | FALLS OF ROUGH Party Affiliation  | 5. Office Soug   | KY<br>aht     | 4011        |                | Statement X (N) OR (A) trict of Candidate     |  |  |
| ٦.  | Dem   | House  |               |             | KY             | 02  |  |  |
|   | DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE   |  |               |             |                |   |  |  |
| 7.  | 7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)              |  |               |             |                |   |  |  |
|   | NOTE: This designation should be f  | the following named political committee as my Principal Campaign Committee for the 2024 (year of election) election(s).  ation should be filed with the appropriate office listed in the instructions.  A committee (in full)  A committee (in full)  A committee (in full)  B committee (in full)  A committee (in full)  A committee (in full)  A committee (in full)  B committee (in full)  A committee (in full)  B committee (in full)  B committee (in full)  A committee (in full)  B committee (in full)  B committee (in full)  A committee (in full)  B comm |               |             |                |   |  |  |
|   | (a) Name of Committee (in full)   |  |               |             |                |   |  |  |
|   | HANK 4 KY   |  |               |             |                |   |  |  |
|   | (b) Address (number and street)   |  |               |             |                |   |  |  |
|   | 1182 PARADISE ACRES RD  |  |               |             |                |   |  |  |
|   | (c) City, State, and ZIP Code   |  |               |             |                |   |  |  |
|   | FALLS OF ROUGH  |  |               |             | KY             | 40119   |  |  |
| 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 |   |  |               |             |                |   |  |  |
|   | (1) - 1) - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1  |  |               |             |                |   |  |  |
| _   | ·   | mined this Sta   | tement and to | the best of | my knowledge a | and belief it is true, correct and complete.  |  |  |
| Si  | gnature of Candidate  | signation should be filed with the appropriate office listed in the instructions.  Immittee (in full)  4 KY  Immor and street)  IADISE ACRES RD  Including Joint Fundraising Representatives)  Including Joint Fundraising Representatives)  Including Instruction should be filed with the principal campaign committee, to receive and expend funds on behalf of my signation should be filed with the principal campaign committee.  Including Joint Fundraising Representatives)  Including Joint Fundraising Representatives  I |               |             |                |   |  |  |
| L   | INDERMAN, HANK, , ,   |  |               |             |                | 10/15/2023                                    |  |  |
| N   | NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g. |  |               |             |                |   |  |  |
|   |   |  |               |             |                |   |  |  |
|   |   | 1  | i             | 1           |                | l l   |  |  |

FEC FORM 2 (REV. 02/2009)