

FEC FORM 2
STATEMENT OF CANDIDACY

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FEC MAIL CENTER

1. (a) Name of Candidate (in full) MATTHEW CLIFFORD ALEXANDER		2. Candidate's FEC Identification Number
(b) Address (number and street) <input type="checkbox"/> Check if address changed 2726 W MAIN ST		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR Amended (A)
(c) City, State, and ZIP Code WAPPINGERS FALLS NY 12590		4. Party Affiliation DEMOCRATIC
5. Office Sought U.S. Representative	6. State & District of Candidate NY-19	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 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) FRIENDS OF MATT ALEXANDER
(b) Address (number and street) 2726 W MAIN ST
(c) City, State, and ZIP Code WAPPINGERS FALLS NY 12590

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 	Date 10/12/2011
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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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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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Other (Specify):

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