# 2019 - 12 - 16 - 08 - 00HONA12

# FEC FORM 2 STATEMENT OF CANDIDACY

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2019 DEC 16 PM 12: 27

			1014110010
1. (a) Name of Candidate (in	full)		
Matthew Caroll Hook			
(b) Address (number and street)		2. FEC Candidate Identification Number	
(c) City, State, and ZIP Co Carmel, IN 46033	de		3. Is This New Amended Statement X (N) OR (A)
4. Party Affiliation	5. Office Sought	6. State & D	istrict of Candidate
Republican	U.S. Representative	IN & 5th	District
	DESIGNATION OF PRINC	CIPAL CAMPAIC	GN COMMITTEE
7. I hereby designate the following	owing named political committee as my Pi	rincipal Campaign Coi	
NOTE: This designation sl	hould be filed with the appropriate office li	sted in the instructions	(year of election) 5.
(a) Name of Committee (in	n full)		
Friends of M	latthew Hook and	d the Fut	ure
(b) Address (number and s	•		
4377 Brecke	enridge Ct.		
(c) City, State, and ZIP Co	de		
Carmel, IN 4	16033	and the second s	
	DESIGNATION OF OTHE		
•	(Including Joint Fu	indraising Representa	itives)
candidacy.	owing named committee, which is NOT my	•	committee, to receive and expend funds on behalf of my
(a) Name of Committee (in	n full)		
	•		
(b) Address (number and s	street)		
(c) City, State, and ZIP Co	de .		
(c) City, State, and ZIP Co	de .		
		best of my knowledge	e and belief it is true, correct and complete.
		best of my knowledge	e and belief it is true, correct and complete.  Date
l certify that l		best of my knowledge	
I certify that I Signature of Candidate	have examined this Statement and to the		12/6/2019
I certify that I Signature of Candidate	have examined this Statement and to the		Date
I certify that I Signature of Candidate	have examined this Statement and to the		12/6/2019

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

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### 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. <b>NOTE</b> : 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. <b>NOTE</b> : 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. <b>NOTE</b> : 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. <b>NOTE</b> : 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				

CARMEL, IN YEOSS

Federal Elector Commission 20443 N.E. 1050 FIRST STREET, WASHWETON, D.C.

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### Federal Election Commission **ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked Date of Receipt **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 25 **PREPARER** DATE PREPARED