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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) RoseAnn Wofford			2. Candidate's FEC Identification Number H4MA03097		
(b) Address (number and street) 18 Lexington Ave			☐ Check if address changed		
(c) City, State, and ZIP Code Haverhill MA 01835			3. Is This Statement ☒ New (N) OR ☐ Amended (A)		
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House		6. State & District of Candidate MA 03	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) Wofford for Congress		
(b) Address (number and street) 18 Lexington Ave		
(c) City, State, and ZIP Code Haverhill MA 01835		

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 RoseAnn Wofford	Date 05/19/2016
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[Electronically Filed]

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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