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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) A Brown, Michael, , ,		
(b) Address (number and street) 5614 CONNECTICUT AVE NW #211		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code WASHINGTON		2. Candidate's FEC Identification Number H4DC01033
4. Party Affiliation INDEPENDENT		3. Is This Statement <input checked="" type="checkbox"/> New (N) <input type="checkbox"/> OR <input type="checkbox"/> Amended (A)
5. Office Sought House		6. State & District of Candidate DC 01

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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 Michael Brown for Congress

(b) Address (number and street)

5614 CONNECTICUT AVE NW #211

(c) City, State, and ZIP Code

WASHINGTON

DC

20015

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

A Brown, Michael, , ,

Date

04/12/2024

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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