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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) HOOD, MICHAEL, , ,			2. Candidate's FEC Identification Number HOOH11114	
(b) Address (number and street) 17628 Winslow Rd		☐ Check if address changed		
(c) City, State, and ZIP Code Shaker Heights OH 44120		3. Is This Statement ☒ New (N) OR ☐ Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate OH 11		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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 HOOD		
(b) Address (number and street) 17628 Winslow Rd		
(c) City, State, and ZIP Code Shaker Heights OH 44120		

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 HOOD, MICHAEL, , , [Electronically Filed]	Date 11/19/2019
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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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