

Image# 202306219582370525

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Salerno, Joe, , ,			2. Candidate's FEC Identification Number H4NJ02207	
(b) Address (number and street) PO Box 72		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code North Cape May NJ 08204		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate NJ 02		

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) Joe Salerno for Congress, Inc.		
(b) Address (number and street) PO Box 72		
(c) City, State, and ZIP Code North Cape May RI 08204		

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 Salerno, Joe, , , <i>[Electronically Filed]</i>	Date 06/21/2023
--	--------------------

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--