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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) MASTRIANO, DOUGLAS PH.D., , COL, Ph.D		2. Candidate's FEC Identification Number H8PA09057
(b) Address (number and street) <input type="checkbox"/> Check if address changed 280 MOUNT UNION RD		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code FAYETTEVILLE PA 17222		
4. Party Affiliation Rep	5. Office Sought House	6. State & District of Candidate PA 13

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) MASTRIANO FOR CONGRESS	
(b) Address (number and street) PO BOX 138	
(c) City, State, and ZIP Code FAYETTEVILLE PA 17222	

### 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 MASTRIANO, DOUGLAS PH.D., , COL, Ph.D  <i>[Electronically Filed]</i>	Date 04/04/2018
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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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