

Image# 202006109239666546

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Sharpe, Thomas, , Mr., V			2. Candidate's FEC Identification Number SONH00342	
(b) Address (number and street) 17 SUMMER ST		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code SALEM NH 03079		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation PBM	5. Office Sought Senate	6. State & District of Candidate NH 01		

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) SHARPE V FOR 603 US SENATE		
(b) Address (number and street) 17 SUMMER ST		
(c) City, State, and ZIP Code SALEM NH 03079		

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 SHARPE, THOMAS, , V, <i>[Electronically Filed]</i>	Date 06/10/2020
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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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