Image# 202008079261279573 PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

| _ | () 11 () () () () () | | | | | | | | | | |
|---|--|-------------------|-------------|-------------|------------------|---|---------------|----------|-------|---------|--|
| 1. | (a) Name of Candidate (in full) | | | | | | | | | | |
| | LINN, MAX, , Mr., | | 1 % 11 | | | 0.0 "1 | | | | | |
| | (b) Address (number and street) ☐ Check if address changed 61 COTTAGE ST #125 | | | | | Candidate's FEC Identification Number S8ME00163 | | | | | |
| | (c) City, State, and ZIP Code | | | | | 3. Is This | | ew | | Amended | |
| | BAR HARBOR | | ME | 0460 | 9 | Statem | nent 🗶 (N | l) OR | | (A) | |
| 4. | Party Affiliation | 5. Office Sought | | | 6. State & Dist | rict of Candid | late | | | | |
| | INDEPENDENT | Senate | | | ME | 00 | | | | | |
| DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE | | | | | | | | | | | |
| 7. | 7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election) | | | | | | | | | | |
| | NOTE: This designation should be filed with the appropriate office listed in the instructions. | | | | | | | | | | |
| (a) Name of Committee (in full) MAX LINN FOR SENATE 2020 | | | | | | | | | | | |
| | (b) Address (number and street) 61 COTTAGE STREET #125 | | | | | | | | | | |
| | (c) City, State, and ZIP Code | | | | | | | | | | |
| | BAR HARBOR | | | | ME | 04609 |) | | | | |
| | BARTIARBOR | | | | | | | | | | |
| 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 exa | mined this Staten | nent and to | the best of | my knowledge a | and belief it is | true, correct | and comp | lete. | | |
| Si | gnature of Candidate | | | | | Date | | | | | |
| Li | INN, MAX, , Mr., | | | [Elect | ronically Filed] | 08/05/202 | 20 | | | | |
| NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g. | | | | | | | | | | | |
| _ | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

FEC FORM 2 (REV. 02/2009)