2019:04:09:0M:00271592

FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full)	adad add		
(b) Address (number and street)	eden bueh/ □ Check if address changed	2. FEC Candidate Identification Number	
(c) City, State, and ZIP Code	ette Road.		
(c) City, State, and ZIP Code (oq tes ville,	## 19320 5. Office Sought	3. Is This New Amended Statement (N) OR (A)	
Party Affiliation	5. Office Sought	6. State & District of Candidate	
Rep.	House	PA 06	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE			
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)			
	for Congres		
1400 N. Pro	videuce Ad., Ste	. 1040	
(c) City, State, and ZIP Code	,		
Media, PA	19063		
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 exan	nined this Statement and to the best of	my knowledge and belief it is true, correct and complete.	
Signature of Candidate		Date	
	<i></i>		
- Hours de	all a	4/1/19	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.			
9-00068	<u> </u>	FEC FORM 2 (REV. 02/2009	

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WASHINGTON DC 20463
(202) 694-1170
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DEPT:



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PREPARER	DATE PREPARED		
(3/2015)			