

Image# 202405089645562595

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Mclver, LaMonica, , ,		2. Candidate's FEC Identification Number H4NJ10176
(b) Address (number and street) PO BOX 25585		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code NEWARK NJ 07101		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 10

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) LAMONICA MCIVER FOR CONGRESS		
(b) Address (number and street) PO BOX 25585		
(c) City, State, and ZIP Code NEWARK NJ 07101		

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 MCIVER, LAMONICA, , ,	Date 05/08/2024
-------------------------------------------------	--------------------

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

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F2N
Transaction ID :

2024 Special Election.

Form/Schedule:
Transaction ID: