

Herb Robinson for Congress
116 Carver Rd
Newton MA 02461

RECEIVED
FEC MAIL CENTER
2020 JAN -7 AM 11:07

Federal Election Commission
1150 First Street, NE
Washington, DC 20463 (zip code 20002 for FedEx, UPS or DHL)

I am filing Form 2 (enclosed) to designate a new principle campaign committee (C00733196). My old committee (C00451146) was terminated and that is somehow preventing me from filing Form 2 online.

Thank You



Herbert W Robinson (H8MA04047)

FEC FORM 2

STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) Herbert William Robinson		
(b) Address (number and street) 116 Carver Rd		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Newton MA 02461-1338		2. FEC Candidate Identification Number H8MA04047
4. Party Affiliation Dem	5. Office Sought House	3. Is This Statement <input type="checkbox"/> New (N) <input checked="" type="checkbox"/> OR <input checked="" type="checkbox"/> Amended (A)
		6. State & District of Candidate MA 4

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) Herb Robinson for Congress
(b) Address (number and street) 116 Carver Rd
(c) City, State, and ZIP Code Newton MA 02461-1338

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



Date

Jan 04, 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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9-00068

FEC FORM 2 (REV. 02/2009)

DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code

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(a) Name of Committee (in full)

(b) Address (number and street)

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(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code

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

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/>	Hand Delivered	Date of Receipt
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<input type="checkbox"/>	Postmark Illegible	
<input type="checkbox"/>	No Postmark	
<input type="checkbox"/>	Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery	<input type="checkbox"/>
<input type="checkbox"/>	Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/>	Other (Specify):	Date of Receipt or Postmarked
PREPARER (3/2015)	<i>MP</i>	1/8/20 DATE PREPARED