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FEC FORM 2

STATEMENT OF CANDIDACY

	me of Candidate (in full)									
	omas, Kevin, , ,									
(b) Address (number and street) 18 Cotton Lane			☐ Check if address changed				Candidate's FEC Identification Number H4NY04182			
(c) Cit	y, State, and ZIP Code					3. Is This		ew	Amended	
Le	evittown		NY	/ 1154	2	Staten	nent X (N) OR	(A)	
4. Party	Affiliation	5. Office Soug	ght		6. State & Dist	trict of Candid	date			
DEM	OCRATIC PARTY	House			NY	04				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)										
NOTE: This designation should be filed with the appropriate office listed in the instructions.										
(a) Name of Committee (in full) FRIENDS OF KEVIN THOMAS										
(b) Address (number and street) PO BOX 243										
(c) Cit	y, State, and ZIP Code									
ι	Jniondale				NY	11553	3			
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										
Thomas, Kevin, , ,					tronically Filed]	07/26/2023				
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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