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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.											
	(a) Name of Candidate (in full)										
	Prijten, Reinier, , ,										
	(b) Address (number and street) 45 S. Park Place Box 17	□Ch	Candidate's FEC Identification Number     H0NJ11131								
	(c) City, State, and ZIP Code					3. Is This		ew		Amended	
	Morristown		NJ	0796	0	Statem	ent 🗶 (N	l) OR		(A)	
4.	Party Affiliation	5. Office Sough	it		6. State & Dist	rict of Candid	ate				
	REPUBLICAN PARTY	House			NJ	11					
	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 f	iled with the app	ropriate offic	e listed in th	ne instructions.						
	(a) Name of Committee (in full)										
	Reinier Congress 20	)20									
	(b) Address (number and street) 45 S. Park Place										
	Box 17										
	(c) City, State, and ZIP Code									,	
	Morristown				NJ	07960					
	DE			_	THORIZED		TEES				
		(Ir	cluding Joint	Fundraisin	g Representativ	es)					
8.	I hereby authorize the following nan candidacy.	ned committee, v	which is NOT	my principa	al campaign con	nmittee, to red	ceive and ex	pend funds	s on beha	ılf of my	
			cipal campai	gn committe	9 <b>6</b>						
	NOTE: This designation should be f	led with the prin			JO.						
		led with the prin									
	NOTE: This designation should be f  (a) Name of Committee (in full)	led with the prin									
	(a) Name of Committee (in full)	led with the prin									
		led with the prin									
	(a) Name of Committee (in full)	led with the prin									
	(a) Name of Committee (in full)  (b) Address (number and street)	led with the prin									
_	(a) Name of Committee (in full)	led with the prin									
_	(a) Name of Committee (in full)  (b) Address (number and street)	led with the prin									
	(a) Name of Committee (in full)  (b) Address (number and street)			the best of		and belief it is	true, correct	and comp	lete.		
Si	(a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code			the best of			true, correct	and comp	lete.		
	(a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have examing the state of Candidate			the best of		Date		and comp	lete.		
	(a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code							and comp	lete.		
	(a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have examing the state of Candidate				my knowledge a	Date		and comp	lete.		
Pi	(a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have examing the state of Candidate	mined this State	ement and to	[Elect	my knowledge a	<b>Date</b> 04/04/201	9			7g.	
Pi	(a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have examing the state of Candidate rijten, Reinier, , ,	mined this State	ement and to	[Elect	my knowledge a	<b>Date</b> 04/04/201	9			7g.	
Pi	(a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have examing the state of Candidate rijten, Reinier, , ,	mined this State	ement and to	[Elect	my knowledge a	<b>Date</b> 04/04/201	9			7g.	

FEC FORM 2 (REV. 02/2009)