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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)					
Hill, Kyle, , ,	□ Ob 1. # - 1.1	b	O Occadiolatela FFO Islandiff		
(b) Address (number and street) PO Box 635	☐ Check if address changed			Candidate's FEC Identification Number H4NY01170	
(c) City, State, and ZIP Code					ew Amended
Port Jefferson	NY	11777		Statement X (N	I) OR (A)
4. Party Affiliation	5. Office Sought			rict of Candidate	
DEMOCRATIC PARTY	House		NY	01	
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)					
Kyle Hill for Congress					
(b) Address (number and street)					
PO Box 635					
(c) City, State, and ZIP Code					
Port Jefferson			NY	11777	
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	
Hill, Kyle, , ,				12/05/2023	
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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FEC FORM 2 (REV. 02/2009)