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FEC FORM 2

STATEMENT OF CANDIDACY

1.													
	(a) Name of Candidate (in full)												
	Gendebien, Blake, , ,		heck if addres			0.0	4-2- FEO I-	4'.6'	-4: N	l la			
	(b) Address (number and street) 1220 L STREET NW STE 100 BOX 384		Candidate's FEC Identification Number H6NY21199										
	(c) City, State, and ZIP Code WASHINGTON	DC 20005				3. Is This Statem		New (N)	OR	Г	Am (A)	ended	
4.	Party Affiliation	5. Office Soug	ht		6. State & Dis	trict of Candid	date				. ,		
	DEMOCRATIC PARTY	House			NY	21							
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE													
7.	hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election)												
	NOTE: This designation should be filed with the appropriate office listed in the instructions.												
	(a) Name of Committee (in full)												
	BLAKE FOR THE NORTH COUNTRY												
	(b) Address (number and street)												
	1220 L STREET NW												
	STE 100 BOX 384												
	(c) City, State, and ZIP Code												
	WASHINGTON				DC	20005	;						
	DE	SIGNATIO	N OF OTI	HER AU	THORIZED	COMMIT	TEES						
					g Representativ								
	I hereby authorize the following nam candidacy.	(Including Join	t Fundraisin	g Representativ	res)		expend	l funds	on b	ehalf d	f my	
	I hereby authorize the following nam	(ined committee,	Including Join	t Fundraisin	g Representativ al campaign cor	res)		expend	l funds	on b	ehalf d	f my	
	I hereby authorize the following nam candidacy.	(ined committee,	Including Join	t Fundraisin	g Representativ al campaign cor	res)		expend	l funds	on b	ehalf d	f my	
	I hereby authorize the following name candidacy. NOTE: This designation should be f	(ined committee,	Including Join	t Fundraisin	g Representativ al campaign cor	res)		expend	I funds	on b	ehalf d	f my	
	I hereby authorize the following name candidacy. NOTE: This designation should be f	(ined committee,	Including Join	t Fundraisin	g Representativ al campaign cor	res)		expend	I funds	on b	ehalf c	f my	
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Siç	I hereby authorize the following name candidacy. NOTE: This designation should be formulated (in full) (b) Address (number and street) (c) City, State, and ZIP Code	(ned committee,	Including Join which is NOT	t Fundraisin Γ my principa	g Representatival campaign con	res) mmittee, to re	true, corre				ehalf c	f my	
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FEC FORM 2 (REV. 02/2009)