

**FEC FORM 2**  
**STATEMENT OF CANDIDACY**

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1. (a) Name of Candidate (in full) <b>Miguel Hernández Vivoni</b>			2. Candidate's FEC Identification Number
(b) Address (number and street) <b>Marginal Summit Hills 569</b>		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)	
(c) City, State, and ZIP Code <b>San Juan, Puerto Rico 00920</b>			
4. Party Affiliation <b>New Progressive Party</b>	5. Office Sought <b>Resident Commissioner</b>	6. State & District of Candidate <b>Puerto Rico</b>	

**DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE**

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) <b>Hernandez Vivoni, Inc.</b>
(b) Address (number and street) <b>Marginal Summit Hills 569</b>
(c) City, State, and ZIP Code <b>San Juan, Puerto Rico 00920</b>

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**

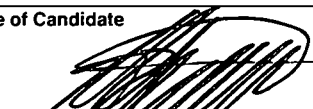
(Including Joint Fundraising Representatives)

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 <b>8/19/14</b>
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**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

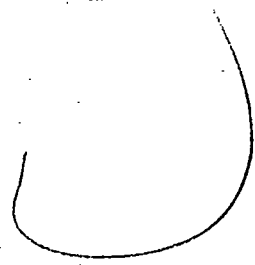
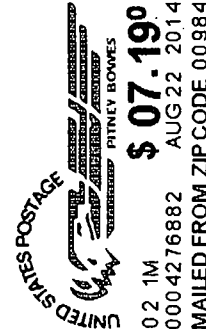
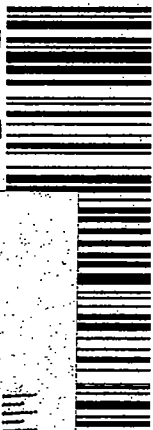
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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER (8/2013)	8/27/14 DATE PREPARED

(8/2013)