

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Franklin, Robert, , Dr.,			2. Candidate's FEC Identification Number HOGA05335	
(b) Address (number and street) 4700 Guilford Forest Drive		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Atlanta		GA	30331	3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate GA 05		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) FRANKLIN FOR CONGRESS, INC.			
(b) Address (number and street) P.O. BOX 110274			
(c) City, State, and ZIP Code ATLANTA		GA	30331

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 Franklin, Robert, , Dr., <i>[Electronically Filed]</i>	Date 08/13/2020
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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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Form/Schedule: F2N
Transaction ID :

This registration is for the September 29, 2020 special election.

Form/Schedule: F2N
Transaction ID:

2020 Special Election.