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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full) Capparell, Chris, , ,										
	(b) Address (number and street) 3500 Quinn Ridge	☐ Check if address changed				Candidate's FEC Identification Number H4GA07309					
	(c) City, State, and ZIP Code Snellville	GA 30039				3. Is This Stateme	ent X (N			Amended (A)	
4.	Party Affiliation DEMOCRATIC PARTY	5. Office Soug House	ht		6. State & Dis	trict of Candida	ate				
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)											
	None										
	(b) Address (number and street)										
	123 Mainstreet										
	(c) City, State, and ZIP Code										
	Anytown				GA	12345					
 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.											
Si	Signature of Candidate						Date				
C	Capparell, Chris, , ,						10/21/2023				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											

FEC FORM 2 (REV. 02/2009)