

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

1. (a) Name of Candidate (in full) Nita M Lowey			2. Identification Number H8NY20056	
(b) Address (number and street) 188 East Post Road		<input type="checkbox"/> Check if address changed		
		Suite 305		
(c) City, State and ZIP Code White Plains NY 10601			3. Is This Statement <input checked="" type="checkbox"/> New (N) <b>OR</b> <input type="checkbox"/> Amended (A)	
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate NY 18		

**DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE**

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 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) Nita Lowey for Congress		
(b) Address (number and street) PO Box 271		
(c) City, State and ZIP Code White Plains NY 10605		

**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.

<b>Signature of Candidate</b> Nita M. Lowey	<b>Date</b> 12/14/2010
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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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