

Image# 201912319166891771

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Kudler, Robert, , ,			2. Candidate's FEC Identification Number HONY02259	
(b) Address (number and street) 4940 Merrick Road		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Massapequa Park NY 11762		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate NY 02		

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) ROBERT KUDLER FOR CONGRESS		
(b) Address (number and street) 2077 BYRON ROAD		
(c) City, State, and ZIP Code MERRICK NY 11566		

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 Kudler, Robert, , , <i>[Electronically Filed]</i>	Date 12/31/2019
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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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