

# FEC FORM 2

## STATEMENT OF CANDIDACY

RECEIVED

2013 AUG 24 AM 5:00

FEC MAIL CENTER

|   |                                     |  |  |
|---|-------------------------------------|--|--|
| 1. (a) Name of Candidate (in full)<br><u>Martin Long</u>    |                                     |  | 2. Candidate's FEC Identification Number |
| (b) Address (number and street)<br><u>30 Mill St. #204</u>  |                                     | <input type="checkbox"/> Check if address changed  |  |
| (c) City, State, and ZIP Code<br><u>Arlington, MA 02476</u> |                                     | 3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A) |  |
| 4. Party Affiliation<br><u>DEM</u>                          | 5. Office Sought<br><u>US House</u> | 6. State & District of Candidate<br><u>MA 5</u>  |  |

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2013 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)<br><u>Martin Long For Congress</u> |
| (b) Address (number and street)<br><u>30 Mill St. #204</u>         |
| (c) City, State, and ZIP Code<br><u>Arlington, MA 02476</u>        |

### 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<br><u>A. Long</u> | Date<br><u>8/21/13</u> |
|--|------------------------|

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

|  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|

13031111792

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

|   |                 |
|---|-----------------|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
|---|-----------------|

|  |            |
|--|------------|
| <input type="checkbox"/> USPS First Class Mail | Postmarked |
|--|------------|

|  |                  |
|--|------------------|
| <input type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) |
|--|------------------|

|   |            |
|---|------------|
| <input type="checkbox"/> USPS Priority Mail | Postmarked |
|---|------------|

|  |                       |
|--|-----------------------|
| <input checked="" type="checkbox"/> USPS Priority Mail Express | Postmarked<br>8/22/13 |
|--|-----------------------|

|   |  |
|---|--|
| <input type="checkbox"/> Postmark Illegible |  |
|---|--|

|                                      |  |
|--------------------------------------|--|
| <input type="checkbox"/> No Postmark |  |
|--------------------------------------|--|

|  |   |
|--|---|
| <input type="checkbox"/> Overnight Delivery Service (Specify): | Shipping Date                                       |
|  | Next Business Day Delivery <input type="checkbox"/> |

|  |                 |
|--|-----------------|
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
|--|-----------------|

|   |                 |
|---|-----------------|
| <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

8/23/13  
DATE PREPARED

(8/2013)

13031111793