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PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

| | | | |
|---|--|---|---|
| 1. (a) Name of Candidate (in full) SIMMONS, JUSTIN, JAY, , | | | |
| (b) Address (number and street) 2063 FLINT HILL RD | | <input type="checkbox"/> Check if address changed | |
| (c) City, State, and ZIP Code COOPERSBURG | | PA | 18036 |
| 4. Party Affiliation REPUBLICAN PARTY | | 5. Office Sought House | 6. State & District of Candidate PA 15 |
| 2. Candidate's FEC Identification Number H8PA15179 | | | |
| 3. Is This Statement <input checked="" type="checkbox"/> New (N) <input type="checkbox"/> OR <input type="checkbox"/> Amended (A) | | | |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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)

JUSTIN SIMMONS FOR CONGRESS

(b) Address (number and street)

5680 MOUNTAIN LAUREL DR

(c) City, State, and ZIP Code

COOPERSBURG

PA

18036

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

Simmons, Justin, Jay, ,

Date

[Electronically Filed]

09/21/2017

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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