FEC FORM 2 STATEMENT OF CANDIDACY

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| 1. (a) Name of Candidate (in full) | | | | |
|---|---------------------------------|----------------|------------------|---|
| Nita M Lowey | | | | |
| (b) Address (number and street) 188 East Post Road Suite 305 | □ Check if address | s changed | | 2. Candidate's FEC Identification Number H8NY20056 |
| (c) City, State, and ZIP Code | | | | 3. Is This New Amended |
| White Plains | NY | 10601 | 1 | Statement X (N) OR (A) |
| 4. Party Affiliation | 5. Office Sought | | 6. State & Distr | rict of Candidate |
| DEMOCRATIC PARTY | House | | NY | 17 |
| DE | SIGNATION OF PRI | NCIPAL | CAMPAIGN | |
| 7. I hereby designate the following name | ned political committee as my | Principal C | Campaign Comm | hittee for the 2016 (year of election) election(s). |
| NOTE: This designation should be fi | led with the appropriate office | e listed in th | e instructions. | |
| (a) Name of Committee (in full) | | | | |
| Nita Lowey for Cong | ress | | | |
| (b) Address (number and street) PO Box 271 | | | | |
| (c) City, State, and ZIP Code | | | | |
| White Plains | | | NY | 10605 |
| candidacy. NOTE: This designation should be fi (a) Name of Committee (in full) | led with the principal campai | gn committe | 96. | |
| (b) Address (number and street) | | | | |
| (c) City, State, and ZIP Code | | | | |
| l certify that I have exa | nined this Statement and to t | the best of r | my knowledge ar | nd belief it is true, correct and complete. |
| Signature of Candidate | | | | Date |
| Nita M. Lowey | | [Elect | ronically Filed] | 11/14/2014 |
| | | | | |
| NOTE: Submission of false, erroneous, | or incomplete information ma | ay subject th | ne person signin | g this Statement to penalties of 2 U.S.C. §437g. |
| NOTE: Submission of false, erroneous, | or incomplete information ma | ay subject th | ne person signin | g this Statement to penalties of 2 U.S.C. §437g. |