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## FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Nam										
	ne of Candidate (in full)									
	den, R. David, , ,					1 "				
	(b) Address (number and street) ☐ Check if address c 103 Houck Road			hanged		Candidate's FEC Identification Number     H2MD01238				
(c) City,	State, and ZIP Code					3. Is This	Ne	W		Amended
We	stminster		MD	21157	•	Staten	nent (N)	OR	×	(A)
4. Party Af	filiation	5. Office Sought			6. State & Dist	rict of Candid	date			
DEMO	CRATIC PARTY	House			MD	01				
	DE	SIGNATION (	OF PRINC	IPAL	CAMPAIGN	N COMMI	TTEE			
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)										
	This designation should be	filed with the approp	riate office lis	sted in th	e instructions.					
(a) Nam	ne of Committee (in full)									
Ha	arden for Congres	SS								
	ress (number and street) Box 491									
(c) City,	State, and ZIP Code									
St	evensville				MD	21666	5			
	DI	CIONATION	SE OTHE	D 4117	LIABIZED	COMMUT	TEEO			
	DE	SIGNATION ( Inclu			Representativ		IEES			
8. I hereby candida	authorize the following nar	ned committee, which	ch is NOT my	principa	l campaign con	nmittee, to re	eceive and exp	end funds	on beh	alf of my
NOTE:	This designation should be	filed with the principa	al campaign	committe	e.					
/ \ \ \ \ \										
(a) Nam	ne of Committee (in full)									
(a) Nam	ne of Committee (in full)									
	ress (number and street)									
(b) Addr	ress (number and street)									
(b) Addr										
(b) Addr	ress (number and street)									
(b) Addr	ress (number and street) State, and ZIP Code	pmined this Stateme	nt and to the	host of r	ny knowledge a	and haliaf it is	true correct	and comple	oto	
(b) Addr	ress (number and street)  State, and ZIP Code  I certify that I have example of the state of the	amined this Stateme	nt and to the	best of n	ny knowledge a		true, correct a	and compl	ete.	
(b) Addr	ress (number and street) State, and ZIP Code	amined this Stateme	nt and to the	best of n	ny knowledge a	and belief it is	true, correct a	and compl	ete.	
(b) Addr	ress (number and street)  State, and ZIP Code  I certify that I have exact of Candidate	amined this Stateme	nt and to the					and compl	ete.	
(b) Addr	ress (number and street)  State, and ZIP Code  I certify that I have exact of Candidate	amined this Stateme	nt and to the		ny knowledge a ronically Filed]	Date		and compl	ete.	
(b) Addr (c) City, Signature Harden, R.	ress (number and street)  State, and ZIP Code  I certify that I have exactly the condition of Candidate  David, , ,			[Electr	onically Filed]	<b>Date</b> 04/15/20	22			
(b) Addr (c) City, Signature Harden, R.	ress (number and street)  State, and ZIP Code  I certify that I have exact of Candidate			[Electr	onically Filed]	<b>Date</b> 04/15/20	22			37g.
(b) Addr (c) City, Signature Harden, R.	ress (number and street)  State, and ZIP Code  I certify that I have exactly the condition of Candidate  David, , ,			[Electr	onically Filed]	<b>Date</b> 04/15/20	22			37g.
(b) Addr (c) City, Signature Harden, R.	ress (number and street)  State, and ZIP Code  I certify that I have exactly the condition of Candidate  David, , ,			[Electr	onically Filed]	<b>Date</b> 04/15/20	22			37g.

FEC FORM 2 (REV. 02/2009)