

Image# 201603239011956869

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) MICHAEL O'REILLY			2. Candidate's FEC Identification Number H6NY05077		
(b) Address (number and street) 1827 CHANNEL ROAD		<input type="checkbox"/> Check if address changed			
(c) City, State, and ZIP Code BROAD CHANNEL NY 11693		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)			
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House		6. State & District of Candidate NY 05		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) O'REILLY FOR CONGRESS		
(b) Address (number and street) 220OLD COUNTRY ROAD SUITE 200		
(c) City, State, and ZIP Code MINEOLA NY 11501		

### 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 MR MICHAEL O'REILLY  <i>[Electronically Filed]</i>	Date 03/23/2016
--	--------------------

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

--	--	--	--	--	--	--	--	--