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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Janowicz, Phil, Andrew, Dr.,							
	(b) Address (number and street) 19 Sycamore Ln	☐ Check if address changed				2. Candidate's FEC Identification Number H8CA39133		
	(c) City, State, and ZIP Code					3. Is This New	Amended	
	Buena Park		CA	9062	1	Statement (N)	OR (A)	
4.	Party Affiliation	5. Office Sought				rict of Candidate		
	DEMOCRATIC PARTY	House			CA	39		
	DE	SIGNATION O	F PRIN	CIPAL	CAMPAIGN	COMMITTEE		
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full)							
Friends of Phil Janowicz								
	(h) Address (number and street)							
	(b) Address (number and street) PO Box 6179							
	(c) City, State, and ZIP Code							
	Buena Park				CA	90622-6179		
	5-	0.00.47.00.0				001414		
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								
	(1, 1, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,							
	I certify that I have exa	mined this Statement	t and to the	e best of	my knowledge a	nd belief it is true, correct an	d complete.	
- C:								
	gnature of Candidate					Date		
Ja	nowicz, Phil, Andrew, Dr.,			[Elect	ronically Filed]	04/25/2017		
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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