FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 1

1.	(a) Name of Candidate (in full)								
	Sare, Diane, Wilson, Ms,								
	(b) Address (number and street) 2 Grant Street					2. Candidate's FEC Identification Number S2NY00325			
	(c) City, State, and ZIP Code					3. Is This New		Amended	
	Sloatsburg		NY	10974	4	Statement (N)	OR	(A)	
4.	Party Affiliation	5. Office Sought			6. State & Distr	ict of Candidate			
	INDEPENDENT	Senate			NY	00			
	DE	ESIGNATION O	F PRINC	IPAL	CAMPAIGN	COMMITTEE			
7.	I hereby designate the following nat	med political committ	ee as my Pr	incipal C	Campaign Comm	ittee for the 2024 (year of election	election(s) n)		
	NOTE: This designation should be t	filed with the appropr	iate office lis	sted in th	ne instructions.				
	(a) Name of Committee (in full) SARE FOR SENAT	E							
	(b) Address (number and street) 233 ROUTE 17 SUITE #308								
	(c) City, State, and ZIP Code								
	TUXEDO PARK				NY	10987			
	candidacy. NOTE: This designation should be f (a) Name of Committee (in full) (b) Address (number and street)	filed with the principa	l campaign c		96.				
	(c) City, State, and ZIP Code								
	I certify that I have exa	amined this Statemen	t and to the	best of ı	my knowledge al	nd belief it is true, correct ar	d complete.		
Si	gnature of Candidate					Date			
Sa	ure, Diane, Wilson, Ms,			[Elect		12/27/2022			
_					ronically Filed]				
NC	DTE: Submission of false, erroneous	, or incomplete inform	nation may s				s of 2 U.S.C.	§437g.	
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