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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Boylan, Lindsey, , ,				1		
	(b) Address (number and street) 511 Avenue of the Americas #4067				Candidate's FEC Identification Number H0NY10070		
	(c) City, State, and ZIP Code				3. Is This New Amended	k	
	New York		NY 10	011	Statement (N) OR (A)		
4.	Party Affiliation	5. Office Sought		6. State & Dis	rict of Candidate	_	
	DEMOCRATIC PARTY	House		NY	10		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE							
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)						
	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
(a) Name of Committee (in full) LINDSEY BOYLAN FOR CONGRESS							
(b) Address (number and street) 511 AVENUE OF THE AMERICAS #4067							
	(c) City, State, and ZIP Code						
	NEW YORK			NY	10011		
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)					_	
	(b) Address (number and street)						
	(c) City, State, and ZIP Code					_	
						_	
	I certify that I have ex	amined this Statement and	I to the best	of my knowledge a	and belief it is true, correct and complete.		
Sig	gnature of Candidate				Date	_	
Bo	yylan, Lindsey, , ,		/E	ectronically Filed]	04/21/2019		
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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FEC FORM 2 (REV. 02/2009)