

Image# 201910319165307916

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Carrigan, Michael, Xavier, ,		2. Candidate's FEC Identification Number H00H05082
(b) Address (number and street) <input type="checkbox"/> Check if address changed 416 W State St.		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code North Baltimore OH 45872		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate OH 05

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) CAMPAIGN FOR MXC 2020		
(b) Address (number and street) 416 W. STATE ST.		
(c) City, State, and ZIP Code NORTH BALTIMORE OH 45872		

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 Carrigan, Michael, Xavier, , <i>[Electronically Filed]</i>	Date 10/31/2019
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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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