# FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 5

1.	(a) Name of Candidate (in full) DEsposito, Anthony, P, ,									
	(b) Address (number and street) PO Box 188	□C	heck if addre	ess change	d	2. Candidate's		ification N	lumber	
						H2NY042				Amondod
	(c) City, State, and ZIP Code Island Park		N`	Y 115	58	3. Is This Statemen	nt (N)		~ ~ ~	Amended (A)
4.	Party Affiliation REPUBLICAN PARTY	5. Office Soug House	ht		6. State & Dis NY	trict of Candidate	9			
	DE	SIGNATIO	N OF PR	INCIPA	L CAMPAIG		IEE			
7.	I hereby designate the following nar	ned political co	mmittee as n	ny Principa	I Campaign Com		2024 ear of electi		on(s).	
	NOTE: This designation should be f	iled with the ap	propriate offi	ce listed ir	the instructions.					
	(a) Name of Committee (in full)									
	D"Esposito for New	York								
	(b) Address (number and street)									
	PO Box 188									
	(c) City, State, and ZIP Code									
	Island Park				NY	11558				
8.	<ul> <li>(Including Joint Fundraising Representatives)</li> <li>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.</li> <li>NOTE: This designation should be filed with the principal campaign committee.</li> </ul>									
	(a) Name of Committee (in full)									
	DEsposito Victory F	und								
	(b) Address (number and street)									
	PO Box 183									
	(c) City, State, and ZIP Code									
	Hudson				WI	54016				
	I certify that I have exa	mined this Stat	ement and to	o the best o	of my knowledge a	and belief it is tru	ie, correct a	ind comp	lete.	
Si	gnature of Candidate					Date				
D	Esposito, Anthony, , ,					04/13/2024				
N	OTE: Submission of false, erroneous	or incomplete	information r	nay subjec	t the person signi	ing this Statemer	nt to penalti	es of 2 U.	S.C. §43	57g.
<u> </u>	I				1	· · · · · · · · · · · · · · · · · · ·				

FEC FORM 2 (REV. 02/2009)

Image# 202404139627620917

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

# 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.

(b) Address (number and street)			
PO BOX 30844			
(c) City, State, and ZIP Code			
BETHESDA	MD	20824	

(a) Name of Committee (in full)					
NEW YORK MAJORITY MAKERS					
(b) Address (number and street) PO BOX 183					
(c) City, State, and ZIP Code HUDSON	WI	54016			

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)					
PROTECT THE HOUSE NEW YORK 2024					
(b) Address (number and street)					
PO BOX 30844					
(c) City, State, and ZIP Code					
BETHESDA	MD	20824			

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)						
SCALISE LEADERSHIP FUND 2024						
(b) Address (number and street)						
320 1ST ST SE						
(c) City, State, and ZIP Code						
WASHINGTON	DC	20003				

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

# 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)			
AMERICAN BATTLEGROUND FUND			
(b) Address (number and street)			
PO BOX 30844			
(c) City, State, and ZIP Code			
BETHESDA	MD	20824	

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)					
NRCC NEW YORK VICTORY					
(b) Address (number and street)					
228 S. WASHINGTON STREET					
SUITE 115					
(c) City, State, and ZIP Code					
ALEXANDRIA	VA	22314			

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)					
EMMER MAJORITY BUILDERS					
(b) Address (number and street) 824 S. MILLEDGE AVE. STE. 101					
(c) City, State, and ZIP Code					
ATHENS	GA	30605			

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)

#### **PROTECT THE HOUSE 2024**

(b) Address (number and street) PO Box 30844

(c) City, State, and ZIP Code

Bethesda

MD 20824

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)				
PFRIENDS OF PFLUGER				
(b) Address (number and street)				
PO BOX 30844				
(c) City, State, and ZIP Code				
BETHESDA	MD	20824		

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)					
HISPANIC LEADERSHIP TRUST PARTNERS	ΗP				
(b) Address (number and street)					
1005 CONGRESS AVE					
STE 400					
(c) City, State, and ZIP Code					
AUSTIN	ТΧ	78701			

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)					
PROTECT THE HOUSE 2024					
(b) Address (number and street) PO Box 30844					
(c) City, State, and ZIP Code					
Bethesda	MD	20824			

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(a) Name of Committee (in full)						
AMERICAN BATTLEGROUND FUND						
(b) Address (number and street)						
PO BOX 30844						
(c) City, State, and ZIP Code						
BETHESDA	MD	20824				

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

## 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)		
GROW THE MAJORITY NY		
(b) Address (number and street) 228 S WASHINGTON ST STE 115		
(c) City, State, and ZIP Code ALEXANDRIA	VA	22314

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)		
GROW THE MAJORITY		
(b) Address (number and street)		
228 S WASHINGTON ST STE 115		
(c) City, State, and ZIP Code		
ALEXANDRIA	VA	22314

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(a) Name of Committee (in full)		
EMMER MAJORITY BUILDERS		
(b) Address (number and street) 824 S. MILLEDGE AVE. STE. 101		
(c) City, State, and ZIP Code ATHENS	GA	30605

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