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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Medway, David, , Dr.,			2. Candidate's FEC Identification Number H8CA49140	
(b) Address (number and street) 7040 Avenida Encinas Ste. 104-514		☐ Check if address changed		
(c) City, State, and ZIP Code Carlsbad CA 92012		3. Is This Statement ☒ New (N) OR ☐ Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate CA 49		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) Dr David Medway for Congress		
(b) Address (number and street) 7040 Avenida Encinas Ste. 104-514		
(c) City, State, and ZIP Code Carlsbad CA 92011		

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 Medway, David, , Dr., [Electronically Filed]	Date 02/23/2018
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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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