

Image# 10990628930

**FEC FORM 2**  
**STATEMENT OF CANDIDACY**

1. (a) Name of Candidate (in full) Mr. JOHN B GOMEZ		
(b) Address (number and street) PO BOX 44		<input type="checkbox"/> Check if address changed
(c) City, State and ZIP Code BAYPORT NY 11705		2. Identification Number HONY02184
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House
		6. State & District of Candidate NY 02
3. Is This Statement <input checked="" type="checkbox"/> New (N) <b>OR</b> <input type="checkbox"/> Amended (A)		

**DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE**

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2010 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) JOHN GOMEZ FOR CONGRESS		
(b) Address (number and street) P.O. BOX 787		
(c) City, State and ZIP Code BAYPORT NY 11705		

**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.

<b>Signature of Candidate</b> Mr. JOHN B GOMEZ	<b>Date</b> 04/22/2010
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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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