Image# 202111099468446965 PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

							_	
1.	(a) Name of Candidate (in full)							
	Hollister, Robert, Michael, , III					,		
	(b) Address (number and street) 598 Millcross Road	□ Che	ck if addres	s changed		Candidate's FEC Identification Number H2PA11114		
	(c) City, State, and ZIP Code					3. Is This New Amende	d	
	Lancaster		PA	1760°	1	Statement (N) OR (A)		
4.	Party Affiliation	5. Office Sought			6. State & Dist	rict of Candidate		
	DEMOCRATIC PARTY	House			PA	11		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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)							
	Hollister for Congres	SS						
	(b) Address (supplies and street)							
	(b) Address (number and street) PO Box 10185							
	(c) City, State, and ZIP Code							
	Lancaster				PA	17605		
	Lancaster					17000		
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 f	iled with the princ	ipal campaiç	gn committe	ee.			
	(a) Name of Committee (in full)						—	
	(a) Name of Committee (in rail)							
	(b) Address (number and street)							
_	(c) City, State, and ZIP Code						—	
	(c) City, State, and ZIP Code							
	I certify that I have exa	mined this Staten	nent and to t	the best of i	my knowledge a	and belief it is true, correct and complete.		
Signature of Candidate					Date			
	gnature of Candidate							
	gnature of Candidate ollister, Robert, Michael, , III			[Flect	ronically Filedl	11/09/2021		
				[Elect	ronically Filed]	11/09/2021		
				[Elect	ronically Filed]	11/09/2021	_	
He	ollister, Robert, Michael, , III	or incomplete inf	ormation ma			11/09/2021 ng this Statement to penalties of 2 U.S.C. §437g.	_	
He	ollister, Robert, Michael, , III	or incomplete inf	ormation ma				<u> </u>	
He	ollister, Robert, Michael, , III	or incomplete inf	ormation ma				<u> </u>	

FEC FORM 2 (REV. 02/2009)