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Image# 201707209066845986

FEC FORM 2

STATEMENT OF CANDIDACY

_	() 11 (((((((((((((((((
1.	(a) Name of Candidate (in full)									
	Osmack, Mark, , ,									
	(b) Address (number and street) 158 Ross Ave	☐ Check if address changed				Candidate's FEC Identification Number H8MO02216				
	(c) City, State, and ZIP Code					3. Is This		New	Amended	
	St. Louis		MC	O 631	46	Staten	nent X	(N) OR	(A)	
4.	Party Affiliation	5. Office Soug	ght		6. State & Dist	trict of Candid	date			
	DEMOCRATIC PARTY	House			MO	02				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	Thereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full)	 :								
	Osmack for Missou	rı								
	(b) Address (number and street) 158 Ross Ave.									
	(c) City, State, and ZIP Code									
	St. Louis				МО	63146	6			
	DI	ESIGNATIO	N OF OT	HER AU	THORIZED	COMMIT	TEES			
(Including Joint Fundraising Representatives)										
8.	I hereby authorize the following na candidacy.	med committee	, which is NO	T my princi	oal campaign cor	mmittee, to re	eceive and	expend funds	s on behalf of my	
	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 ex	amined this Sta	tement and to	the hest o	f my knowledge a	and helief it is	true corre	ect and comp	lete	
Q;	gnature of Candidate	animod tino Ota	tomon and to		my miowieage a	Date		o. and comp		
Ormand Mark										
O.	smack, wark, , ,			[Ele	ctronically Filed]	07/20/20	17			
NO	OTE: Submission of false, erroneous	s, or incomplete	information r	nay subject	the person signi	ng this Stater	ment to pen	nalties of 2 U.	S.C. §437g.	
NO	OTE: Submission of false, erroneous	s, or incomplete	information r	nay subject	the person signi	ng this Stater	ment to pen	nalties of 2 U.	S.C. §437g.	

FEC FORM 2 (REV. 02/2009)