Image# 28993109986 FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)									
Robert Roggio									
(b) Address (number and street) 23 Eastwick Dr	Check if address changed				2. Identification Number H8PA06079				
(c) City, State and ZIP Code					3. Is This	Now		Amended	
Malvern	PA		19355		Stateme		OR	(A)	
4. Party Affiliation	5. Office Sought				strict of Candi	date			
DEMOCRATIC PARTY	House			PA 06)				
DI	ESIGNATION (OF PRIN	ICIPAL CA	MPAIGN (COMMITT	EE			
7. I hereby designate the following name	ed political committe	e as my Pri	ncipal Campa	gn Committee		2008 (vear of election	_ election	on(s).	
NOTE:This designation should be	a filed with the app	ropriate off	ice listed in t	ne inetruction		(year or election	1)		
	tilled with the app	opriate on	ice iisted iii ti	ie iristi uctioni	5.				
(a) Name of Committee (in full)									
Bob Roggio for Congress Cor	nmittee								
(b) Address (number and street)									
9 Old Lincoln Hwy	Suite	e 101							
(c) City, State and ZIP Code									
Malvern	PA		10	355					
	FA		15.						
DI	ESIGNATION (•		ES			
	(Inc	luding Joir	nt Fundraisin	g Representa	tives)				
I hereby authorize the following name candidacy.	d committee, which	is NOT my	principal cam	paign committ	tee, to receive	and expend fun	ds on bel	nalf of my	
NOTE:This designation should be	filed with the prin	rinal camn	aian committ	66					
	Thea with the print								
(a) Name of Committee (in full)									
Southeastern Pennsylvania Vi	ctory Fund								
(b) Address (number and street)									
499 S Capitol St SW	499 S Capitol St SW Suite 404								
(c) City, State and ZIP Code									
Washington	DC		20	003					
DECLARATION OF					6 (House o	or Senate C	nly)		
9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) by									
	9A	9A 0.00				for the primary election, and			
9B 0.00					for the general election.				
If you do not intend to expend personal f	unds exceeding the	threshold a	mount for eith	er election, you	u must enter "(0.00" for each.			
I certify that I have ex	amined this Stater	nent and to	the best of r	ny knowledge	and belief it	is true, correc	t, and c	omplete.	
Signature of Candidate					Date				
Robert Roggio					11/04/2008				
NOTE: Submission of false, erroneous or incomplete information may subject the person sign									
			ay subject	o porson siç	J. III I I I I I I I I I I I I I I I I I	Lonioni to pend		- 0.0.0.3707g.	

FE3AN039.PDF FEC FORM 2 (REV. 02/2003)