

STATEMENT OF DESIGNATION OF COUNSEL

Provide one form for each Respondent/Witness

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	-MUR# PM 607		
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	individual and/or firm is hereby designate ther communications from the Commission Zewditu Bekele-Arcuri Digitally signed Date: 2019.04	on and to act on my be	
Date	(Signature - Respondent/Agent/T Zewditu Bekele-Arcuri	reasurer)	Title
	(Name – Please Print)		
RESPONDENT:	Zewditu Bekele-Arcuri		
	(Please print Committee Name/ Company	Name/Individual Nam	ned in Notification Letter)
Mailing Address:	l .		
(Please Print)	Middletown NY 10940		
	Home#:	Mobile#:	
1	Office#: (845)454967064	Fax#:	
	Becord yeta Hundre at the care.		

This form relates to a Federal Election Commission matter that is subject to the confidentiality provisions of 52 U.S.C. § 30109(a)(12)(A). This section prohibits making public any notification or investigation conducted by the Federal Election Commission without the express written consent of the person under investigation.