Image# 201811149133679071 PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)					
Crist, Charlie, , ,					
(b) Address (number and street) PO Box 1547	☐ Check if address changed		Candidate's FEC Identification Number H6FL13205		
(c) City, State, and ZIP Code					ew Amended
St. Petersburg	F	L 3373	1	Statement X (N) OR (A)
4. Party Affiliation	5. Office Sought		6. State & Dist	rict of Candidate	
DEMOCRATIC PARTY	House		FL	13	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE					
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)					
NOTE: This designation should be filed with the appropriate office listed in the instructions.					
(a) Name of Committee (in full)					
Charlie Crist for Cor	igress				
(b) Address (supplies and street)					
(b) Address (number and street) PO Box 1547					
(c) City, State, and ZIP Code					
St. Petersburg			FL	33731	
	-				
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)					
(a) Name of Committee (in full)					
Crist Victory Fund					
(b) Address (number and street)					
611 Pennsylvania Avenue SE					
Suite 143					
(c) City, State, and ZIP Code					
Washington			DC	20003	
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.					
Signature of Candidate				Date	
Crist, Charlie, Joseph, ,				11/14/2018	
• • •		[Elec	tronically Filed]	11/14/2010	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.					
		1	·	· ·	
	1				_

FEC FORM 2 (REV. 02/2009)