

FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) JOSH LAROSE			2. Candidate's FEC Identification Number	
(b) Address (number and street) P. O. BOX 9961		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code FORT LAUDERDALE FL 33310		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought Senate	6. State & District of Candidate FL		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) JOSH LAROSE FOR UNITED STATES SENATE 2016		
(b) Address (number and street) P. O. BOX 9961		
(c) City, State, and ZIP Code FORT LAUDERDALE FL 33310		

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)		
(b) Address (number and street)		
(c) City, State, and ZIP Code		

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 JOSH LAROSE 	Date 05/06/2015
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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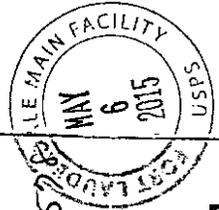
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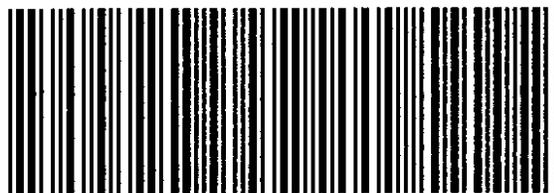
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