

Image# 201806269115169519

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Mucarsel-Powell, Debbie, , ,		2. Candidate's FEC Identification Number H8FL26039
(b) Address (number and street) <input type="checkbox"/> Check if address changed PO Box 566442		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code Miami FL 33256		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate FL 26

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) Debbie for Congress		
(b) Address (number and street) PO Box 566442		
(c) City, State, and ZIP Code Miami FL 33256		

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) House Victory Project		
(b) Address (number and street) 918 Pennsylvania Avenue SE		
(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 Mucarsel-Powell, Debbie, , , <i>[Electronically Filed]</i>	Date 06/26/2018
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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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Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

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)

South Florida Women's Victory Fund

(b) Address (number and street)

611 Pennsylvania Ave SE
Num 143

(c) City, State, and ZIP Code

Washington DC 20003

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

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

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