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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full) CURBELO, CARLOS, , Mr.,					
	<u> </u>		la a al a Maradala a			O O and industrial EFO Industrial and Name to an
	(b) Address (number and street) 8724 Sunset Dr #355	ПС	heck if addre	ss changed		Candidate's FEC Identification Number H4FL26038
	(c) City, State, and ZIP Code					3. Is This New Amended
	MIAMI		FL	_ 3317	3	Statement (N) OR (A)
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	rict of Candidate
	REPUBLICAN PARTY	House			FL	26
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIGN	N COMMITTEE
7.	I hereby designate the following nar	ned political co	mmittee as n	ny Principal (Campaign Comr	nittee for the $\frac{2018}{\text{(year of election)}}$ election(s).
	NOTE: This designation should be f	iled with the ap	propriate offi	ce listed in tl	ne instructions.	
	(a) Name of Committee (in full) CARLOS CURBELO) CONGF	RESS			
	(b) Address (number and street)					
	8724 SUNSET DR					
	#355					
	(c) City, State, and ZIP Code					
	MIAMI				FL	33173
	DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)					
		(including Joir	nt Fundraisin	g Representativ	es)
8.	I hereby authorize the following nam candidacy.	·			•	es) nmittee, to receive and expend funds on behalf of my
8.	•	ned committee	which is NO	T my princip	al campaign con	,
8.	candidacy.	ned committee	which is NO	T my princip	al campaign con	,
8.	candidacy. NOTE: This designation should be form	ned committee	which is NO	T my princip	al campaign con	,
8.	candidacy. NOTE: This designation should be find the fin	ned committee	which is NO	T my princip	al campaign con	,
8.	candidacy. NOTE: This designation should be fi (a) Name of Committee (in full) CURBELO VICTOR (b) Address (number and street) 824 S. Milledge Ave	ned committee	which is NO	T my princip	al campaign con	,
8.	candidacy. NOTE: This designation should be fi (a) Name of Committee (in full) CURBELO VICTOR (b) Address (number and street) 824 S. Milledge Ave Ste 101	ned committee	which is NO	T my princip	al campaign con	,
8.	candidacy. NOTE: This designation should be five formula of the f	ned committee	which is NO	T my princip	al campaign con	nmittee, to receive and expend funds on behalf of my
8.	candidacy. NOTE: This designation should be fi (a) Name of Committee (in full) CURBELO VICTOR (b) Address (number and street) 824 S. Milledge Ave Ste 101	ned committee	which is NO	T my princip	al campaign con	,
8.	candidacy. NOTE: This designation should be fi (a) Name of Committee (in full) CURBELO VICTOR (b) Address (number and street) 824 S. Milledge Ave Ste 101 (c) City, State, and ZIP Code Athens	red committee,	which is NO	T my princip	al campaign con	nmittee, to receive and expend funds on behalf of my
	candidacy. NOTE: This designation should be five five five five five five five fiv	red committee,	which is NO	T my princip	al campaign con	and belief it is true, correct and complete.
Sig	candidacy. NOTE: This designation should be fi (a) Name of Committee (in full) CURBELO VICTOR (b) Address (number and street) 824 S. Milledge Ave Ste 101 (c) City, State, and ZIP Code Athens I certify that I have example of Candidate	red committee,	which is NO	T my princip	al campaign con	and belief it is true, correct and complete. Date
Sig	candidacy. NOTE: This designation should be five five five five five five five fiv	red committee,	which is NO	T my princip	al campaign con	and belief it is true, correct and complete.
Sig	candidacy. NOTE: This designation should be fi (a) Name of Committee (in full) CURBELO VICTOR (b) Address (number and street) 824 S. Milledge Ave Ste 101 (c) City, State, and ZIP Code Athens I certify that I have example of Candidate	red committee,	which is NO	T my princip	al campaign con ee. GA my knowledge a	and belief it is true, correct and complete. Date
Si ₁	candidacy. NOTE: This designation should be five fill (a) Name of Committee (in full) CURBELO VICTOR (b) Address (number and street) 824 S. Milledge Ave Ste 101 (c) City, State, and ZIP Code Athens I certify that I have example for the condidate URBELO, CARLOS, Mr.,	red committee, seek with the property COMM	which is NO	T my princip aign committe	GA my knowledge a	and belief it is true, correct and complete. Date
Si ₁	candidacy. NOTE: This designation should be five fill (a) Name of Committee (in full) CURBELO VICTOR (b) Address (number and street) 824 S. Milledge Ave Ste 101 (c) City, State, and ZIP Code Athens I certify that I have example for the condidate URBELO, CARLOS, Mr.,	red committee, seek with the property COMM	which is NO	T my princip aign committe	GA my knowledge a	30605 and belief it is true, correct and complete. Date 06/06/2018
Si ₁	candidacy. NOTE: This designation should be five fill (a) Name of Committee (in full) CURBELO VICTOR (b) Address (number and street) 824 S. Milledge Ave Ste 101 (c) City, State, and ZIP Code Athens I certify that I have example for the condidate URBELO, CARLOS, Mr.,	red committee, seek with the property COMM	which is NO	T my princip aign committe	GA my knowledge a	30605 and belief it is true, correct and complete. Date 06/06/2018

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	Rise Project							
	(b) Address (number and street) PO Box 2485							
	(c) City, State, and ZIP Code							
	Springfield VA	١	22152					
8.		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.						
	MILLENNIAL GOP VICTORY COMMITTEE 2017							
	(b) Address (number and street) 824 S MILLEDGE AVE STE 101							
	(c) City, State, and ZIP Code							
	ATHENS GA		30605					
8.	8. I hereby authorize the following named committee, which is NOT my principal can candidacy. NOTE: This designation should be filed with the principal campaign of (a) Name of Committee (in full) CURBELO/COSTELLO LEADERSHIP COMMITTEE	ommittee.	nmittee, to receive and expend funds on behalf of my					
	(b) Address (number and street) 824 S MILLEDGE AVE STE 101							
	(c) City, State, and ZIP Code							
	ATHENS GA	;	30605					
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of r candidacy. NOTE : This designation should be filed with the principal campaign committee.								
(a) Name of Committee (in full) BLUE COLLAR VICTORY FUND								
	(b) Address (number and street) PO BOX 9891							
	(c) City, State, and ZIP Code							
	ARLINGTON VA		22219					

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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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)							
	PATRIOT DAY II 2017							
	(b) Address (number and street) PO BOX 9891							
	(c) City, State, and ZIP Code							
	ARLINGTON	VA	22219					
8.	I hereby authorize the following named committee, which is NOT my princip candidacy. NOTE : This designation should be filed with the principal campa							
	(a) Name of Committee (in full)							
	MCHENRY-CURBELO LEADERSHIP FUND							
	(b) Address (number and street) 228 S. WASHINGTON ST.							
	STE. 115							
	(c) City, State, and ZIP Code							
	ALEXANDRIA	VA	22314					
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campa (a) Name of Committee (in full) NEW SOLUTIONS VICTORY COMMITTEE							
	(b) Address (number and street) 824 S MILLEDGE AVE STE 101							
	(c) City, State, and ZIP Code							
	ATHENS	GA	30605					
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) DEFENDING DEMOCRACY FUND								
	(b) Address (number and street) 610 S. BOULEVARD							
	OTO G. BOOLE VARIO							
	(c) City, State, and ZIP Code							
	TAMPA	FL	33606					