

Image# 202605289870302020

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Moise, Rudolph, , Dr.,		2. Candidate's FEC Identification Number H0FL17118
(b) Address (number and street) <input type="checkbox"/> Check if address changed 12947 Equestrian Trail		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code Davie FL 33330		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate FL 24

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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) MOISE FOR CONGRESS	
(b) Address (number and street) P.O. BOX 824915	
(c) City, State, and ZIP Code PEMBTOKE PINES FL 33082	

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 <i>Moise, Rudolph, , Dr.,</i>	Date 05/28/2026
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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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Form/Schedule: F2A

Transaction ID :

Re-filing due to prior errors with original 1/20/2026 filing.

Form/Schedule:

Transaction ID: