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FEC FORM 2 STATEMENT OF CANDIDACY

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20	NC AUD O L. ASSESSMENT	
1. (a) Name of Candidate (in full)	TO THE PARTY OF TH	
Benjamin Allen	the transfer was a second of the second of t	
(b) Address (number and street) ☐ Check if address changed 2321 Viscaya Pkwy	2. FEC Candidate Identification Number	
(c) City, State, and ZIP Code Cape Coral, FL, 33990	3. Is This New New Amended Statement (N) OR (A)	
4. Party Affiliation 5. Office Sought 6. State & Distr Independent President	rict of Candidate	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE		
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)		
NOTE: This designation should be filed with the appropriate office listed in the instructions. Ben Allen Victory Fund 2016 (a) Name of Committee (in full)		
2321 Viscaya Pkwy	, " .	
(b) Address (number and street)		
Cape Coral, FL, 33990		
(c) City, State, and ZIP Code		
	The state of the s	
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)		
 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	Date	
Bulle	8120/15	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.		
9-00068	FEC FORM 2 (REV. 02/2009)	

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(3/2015)