

Image# 202206179515012047

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Holloway, LaShonda, J, ,		2. Candidate's FEC Identification Number H6FL05193
(b) Address (number and street) <input type="checkbox"/> Check if address changed 11453 Jerry Adam Drive		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code Jacksonville FL 32218		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate FL 04

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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) L.J. HOLLOWAY FOR CONGRESS		
(b) Address (number and street) 731 DUVAL STATION ROAD #173		
(c) City, State, and ZIP Code JACKSONVILLE FL 32218		

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 Brown, Yolanda, J., , <i>[Electronically Filed]</i>	Date 06/17/2022
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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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