

**FEC FORM 2**  
**STATEMENT OF CANDIDACY**

RECEIVED

2013 JUL 8 AM 10:28

1. (a) Name of Candidate (in full) <b>Jean L. Enright</b>		2. Candidate's FEC Identification Number
(b) Address (number and street) <input type="checkbox"/> Check if address changed <b>P.O. Box 30232</b>		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code <b>Palm Beach Gardens, FL 33420</b>		
4. Party Affiliation <b>Democrat</b>	5. Office Sought <b>US House</b>	6. State & District of Candidate <b>Florida District 20</b>

**DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE**

7. I hereby designate the following named political committee as my Principal Campaign Committee for the **2014** 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) <b>Dr. Jean L. Enright for Congress</b>
(b) Address (number and street) <b>P.O. Box 30232</b>
(c) City, State, and ZIP Code <b>Palm Beach Gardens, FL 33420</b>

**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>N/A</b>
(b) Address (number and street) <b>N/A</b>
(c) City, State, and ZIP Code <b>N/A</b>

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 <b>Jean L. Enright</b>	Date <b>07-05-2013</b>
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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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Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed-Exp</i>	Shipping Date <i>7/4/13</i>
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*Jul 10* *7/8/13*  
 PREPARER DATE PREPARED