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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) LARKIN, PHILIP, , MR,			2. Candidate's FEC Identification Number H2FL14285	
(b) Address (number and street) 4789 RIDGE ROAD			☐ Check if address changed	
(c) City, State, and ZIP Code TALLAHASSEE FL 34668			3. Is This Statement ☒ New (N) OR ☐ Amended (A)	
4. Party Affiliation INDEPENDENT CONSERV. DE	5. Office Sought House	6. State & District of Candidate FL 14		

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) US INDEPENDENT CONSERVATIVE PARTY		
(b) Address (number and street) 55 EAST 3RD STREET		
(c) City, State, and ZIP Code NEW YORK FL 10003		

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 LARKIN, PHILIP, , MR, [Electronically Filed]	Date 04/05/2022
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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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