

Image# 201911149165503109

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Holden, David, , ,			2. Candidate's FEC Identification Number H0FL19155	
(b) Address (number and street) 743 Bentwater Cir. Apt. 203		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Naples FL 34108		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate FL 19		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) DAVID HOLDEN FOR FLORIDA 2020		
(b) Address (number and street) PO BOX 413005		
(c) City, State, and ZIP Code NAPLES FL 34101		

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 Holden, David, , , <i>[Electronically Filed]</i>	Date 11/14/2019
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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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