

Image# 202110059467191109

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Williams, Mikal, D., Dr,		2. Candidate's FEC Identification Number H0TX14218
(b) Address (number and street) 1207 Delores St. <input checked="" type="checkbox"/> Check if address changed		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code Kemah TX 77565		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate TX 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) TEXANS FOR MIKAL WILLIAMS	
(b) Address (number and street) PO BOX 732	
(c) City, State, and ZIP Code KEMAH TX 77565	

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 Williams, Mikal, D, Dr., <i>[Electronically Filed]</i>	Date 10/05/2021
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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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