

FEC FORM 2
STATEMENT OF CANDIDACY

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| | | | |
|---|---------------------------------------|--|--|
| 1. (a) Name of Candidate (in full) <i>NINA LYNN HAYDEN</i> | | | 2. Candidate's FEC Identification Number |
| (b) Address (number and street) <i>P.O. BOX 17811</i> | | <input checked="" type="checkbox"/> Check if address changed | |
| (c) City, State, and ZIP Code <i>CLEARWATER, FL, 33762</i> | | 3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A) | |
| 4. Party Affiliation <i>DEMOCRAT</i> | 5. Office Sought <i>U.S. HOUSE</i> | 6. State & District of Candidate <i>FL DISTRICT 13</i> | |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 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) <i>NINA HAYDEN FOR CONGRESS</i> |
| (b) Address (number and street) <i>P.O. BOX 17811</i> |
| (c) City, State, and ZIP Code <i>CLEARWATER, FL 33762</i> |

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  | Date <i>6/27/12</i> |
|---|------------------------|

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
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PREPARER

7/11/12
DATE PREPARED

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