

# FEC FORM 2

## STATEMENT OF CANDIDACY

|                                                               |                           |                                                                                                          |                          |  |
|---------------------------------------------------------------|---------------------------|----------------------------------------------------------------------------------------------------------|--------------------------|--|
| 1. (a) Name of Candidate (in full)<br>Dianne Jordan Berryhill |                           |                                                                                                          | 2. Identification Number |  |
| (b) Address (number and street)<br>1528 Woodgate Way          |                           | <input type="checkbox"/> Check if address changed                                                        |                          |  |
| (c) City, State, and ZIP Code<br>Tallahassee, FL 32308        |                           | 3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A) |                          |  |
| 4. Party Affiliation<br>NPA                                   | 5. Office Sought<br>House | 6. State & District of Candidate<br>Florida District 2                                                   |                          |  |

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2010 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)<br>Berryhill for Congress 2010 |
| (b) Address (number and street)<br>1528 Woodgate Way           |
| (c) City, State, and ZIP Code<br>Tallahassee, FL 32308         |

### 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<br> | Date<br>05/10/2010 |
|---------------------------------------------------------------------------------------------------------------|--------------------|

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

(3/2005)

5/17/10

DATE PREPARED

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