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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Scrivener, Branden, , ,		
(b) Address (number and street) 9683 ashworth pl		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code land o lakes		2. Candidate's FEC Identification Number H6FL12231
4. Party Affiliation NPA		3. Is This Statement <input checked="" type="checkbox"/> New (N) <input type="checkbox"/> OR <input type="checkbox"/> Amended (A)
5. Office Sought House	6. State & District of Candidate FL 12	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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)

Citizens for Branden Scrivener

(b) Address (number and street)

PO BOX 1311

(c) City, State, and ZIP Code

Land O Lakes

FL 34639

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 Scrivener, Branden, , ,	Date 01/25/2026
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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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