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FEC FORM 2

STATEMENT OF CANDIDACY

							=	
1.	(a) Name of Candidate (in full)							
	Soriano, Gavriel, Eliyahu, ,		baalast 12			O Condidatela FFO Idaniii ii N		
	(b) Address (number and street) 8624 CR 635	☐ Check if address changed				Candidate's FEC Identification Number H2FL11125		
	(c) City, State, and ZIP Code					3. Is This New Amended	k	
	Bushnell		FL	. 3351	3	Statement (N) OR (A)		
4.	Party Affiliation	5. Office Soug	ht			trict of Candidate		
	REPUBLICAN PARTY	House			FL	11		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
(a) Name of Committee (in full) SORIANO FOR CONGRESS								
	(b) Address (number and street) 8624 CR 635						_	
	(c) City, State, and ZIP Code							
	BUSHNELL				FL	33513		
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.								
Si	gnature of Candidate					Date	•	
Se	oriano, Gavriel, Eliyahu, ,			[Elect	ronically Filed]	05/05/2021		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								

FEC FORM 2 (REV. 02/2009)