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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Campbell, Luther, , Mr.,		
(b) Address (number and street) 15757 Pines Blvd Box 37		☒ Check if address changed
(c) City, State, and ZIP Code Pembroke Pines FL 33027		2. Candidate's FEC Identification Number H4FL20098
4. Party Affiliation DEMOCRATIC PARTY		3. Is This Statement ☐ New (N) OR ☒ Amended (A)
5. Office Sought House		6. State & District of Candidate FL 20

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) LUTHER UNCLE LUKE CAMPBELL FOR CONGRESS		
(b) Address (number and street) PO BOX 827842		
(c) City, State, and ZIP Code PEMBROKE PINES FL 33082		

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 Campbell, Luther, , Mr.,	Date 03/15/2026
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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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