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FEC FORM 2

STATEMENT OF CANDIDACY

=									
1.	(a) Name of Candidate (in full) Moskowitz, Jared, , ,								
	(b) Address (number and street)		☐ Check if address changed			2. Candidate's FEC Identification Number			
	PO Box 8784		_ oncor ii addioco onangod			H2FL22171			
	(c) City, State, and ZIP Code			3306	5	3. Is This Statement (N) OR (A)	nded		
4.	Coral Springs Party Affiliation	5. Office Soug	FL 33065		trict of Candidate				
٠.	DEMOCRATIC PARTY	House	,,,,		FL FL	23			
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election)								
	NOTE: This designation should be	e filed with the ap	propriate offi	ce listed in th	ne instructions.				
	(a) Name of Committee (in full)								
	Jared Moskowitz for Congress								
	(b) Address (number and street)								
	PO Box 8784								
	(c) City, State, and ZIP Code								
	Coral Springs				FL	33065			
					THORIZED g Representativ	COMMITTEES res)			
8.	I hereby authorize the following r candidacy.	named committee,	, which is NO	Γ my principa	al campaign co	nmittee, to receive and expend funds on behalf of	my		
	NOTE: This designation should be	e filed with the pr	incipal campa	ign committe	ee.				
	(a) Name of Committee (in full)								
	Moskowitz Victory Fund								
	(b) Address (number and street)						-		
	PO BOX 65322								
	(c) City, State, and ZIP Code								
	Washington				DC	20035			
						11 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			
		examined this State	tement and to	the best of i	my knowledge i	and belief it is true, correct and complete.			
Signature of Candidate					Date	•			
Moskowitz, Jared, , ,						11/15/2024			
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)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8.	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)								
	Democracy Summer 2024								
	(b) Address (number and street) 600 PENNSYLVANIA AVE SE #15180								
	(c) City, State, and ZIP Code								
	Washington DC 20003								
8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of neandidacy. NOTE : This designation should be filed with the principal campaign committee.								
	(a) Name of Committee (in full)								
	Blue to the Future								
	(b) Address (number and street) PO BOX 65322								
	(c) City, State, and ZIP Code								
	Washington DC 20035								
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								
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								