

Image# 202111179468565321

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Murray, Theodore, Andrew, ,		2. Candidate's FEC Identification Number H0FL17175
(b) Address (number and street) 1681 McClellan Rd	<input type="checkbox"/> Check if address changed	
(c) City, State, and ZIP Code Frostproof FL 33843	3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)	
4. Party Affiliation NON	5. Office Sought House	6. State & District of Candidate FL 17

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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) THEODORE PINK TIE MURRAY	
(b) Address (number and street) 1681 MCCLELLAN RD	
(c) City, State, and ZIP Code FROSTPROOF FL 33843	

### 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 Murray, Theodore, , ,  <i>[Electronically Filed]</i>	Date 11/17/2021
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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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