FEC FORM 2 STATEMENT OF CANDIDACY

RECEIVED

2017 OCT 12 AM 7: 02

1. (a) Name of Candidate (in full)	· ·			
Stephen M. Perenich (b) Address (number and street) 124 Westgate Rd.	mber and street)		2. FEC Candidate Identification Number	
(c) City, State, and ZIP Code Tarpon Springs, FL 34688			3. Is This New Statement (N)	· · · · · · · · · · · · · · · · · · ·
4. Party Affiliation	5. Office Sought		trict of Candidate	
Democrat	United States Congress	Florida, 12	Congressional District	
D	ESIGNATION OF PRINCIP	AL CAMPAIG		•
7. I hereby designate the following na	amed political committee as my Princi	pal Campaign Com		election(s)
NOTE: This designation should be	filed with the appropriate office listed	in the instructions.	(year of electio	<i>in)</i>
(a) Name of Committee (in full)	· · · ·			
Perenich For C	ongress			
(b) Address (number and street)			· ·	
PO Box 1025	•		· `k	· .
(c) City, State, and ZIP Code	· · · · · · · · · · · · · · · · · · ·	-	-	
Tarpon Springs	;FL 34688		4	
		•		
D D	ESIGNATION OF OTHER J (Including Joint Fundra			· · · · · · · · · · · · · · · · · · ·
8. I hereby authorize the following na	med committee, which is NOT my pri	ncipal campaign co	mmittee, to receive and expe	nd funds on behalf of my
candidacy. NOTE: This designation should be	filed with the principal campaign corr	imittee.	·. · · · ·	
			·· ·	•
(a) Name of Committee (in full)				
			•	
, (h) A Llassa (······			
(b) Address (number and street)				
			,	
(c) City, State, and ZIP Code				
· · · ·				
I certify that I have example	arriined this Statement and to the bes	t of my knowledge	and belief it is true, correct a	nd complete.
Signature of Candidate	<u></u>		Date	
Style Perenul	• • • • • • • • • • • • • • • • • • •		10/6/1-	7
NOTE: Submission of false, erroneou	is, or incomplete information may sub	ject the person sign	ing this Statement to penaltie	es of 52 U.S.C. §30109.
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-00068				FEC FORM 2 (REV. 02/20
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Optional Supplemental Page for Designation of Additional Authorized Committees

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	DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	N 6
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on b candidacy. NOTE : This designation should be filed with the principal campaign committee.	ehalf of my
	(a) Name of Committee (in full)	• •••• •••
	(b) Address (number and street)	· ·
	(c) City, State, and ZIP Code	[
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	(c) City, State, and ZIP Code	
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	(b) Address (number and street)	
	(c) City, State, and ZIP Code	•
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING I The FEC added this page to the end of this filing to indicate h	
Hand Delivered	Date of Receipt
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Overnight Delivery Service (Specify): Next Business	Shipping Date
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Date of Re Other (Specify):	eceipt or Postmarked
PREPARER	10/2/2017 DATE PREPARED
(3/2015)	

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