

Image# 202003099203796332

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Henderson, Randy, , ,		2. Candidate's FEC Identification Number H0FL19189
(b) Address (number and street) <input checked="" type="checkbox"/> Check if address changed PO Box 2353		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code Fort Myers FL 33902		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate FL 19

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) RANDY HENDERSON FOR CONGRESS		
(b) Address (number and street) 1404 DEAN ST STE 100		
(c) City, State, and ZIP Code FORT MYERS FL 33901		

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 Henderson, Randy, , , <i>[Electronically Filed]</i>	Date 03/09/2020
--	--------------------

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--