FEC FORM 2

STATEMENT OF CANDIDACY

		. .						
1.	(a) Name of Candidate (in full)							
	Pollard, William, Cyrus, Mr., Jr. (b) Address (number and street) Check if address changed 2. Candidate's FEC Identification Number							
	(b) Address (number and street) 2345 N. Carpenter Rd	neck if addre	ss changed		Candidate's FEC Identification Number H8FL17020			
	(c) City, State, and ZIP Code					3. Is This No		
				FL 33825-9292		Statement (N) OR (A)	
4.	Party Affiliation	5. Office Soug	ıht			rict of Candidate		
	DEMOCRATIC PARTY	House			FL	17		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
(a) Name of Committee (in full)								
Bill Pollard Campaign								
	(b) Address (number and street)							
	P.O. Box 1124							
	(c) City, State, and ZIP Code							
	Sebring				FL	33870		
	Cobing				. –			
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)								
(b) Addition (namber and street)								
(c) City, State, and ZIP Code								
	I certify that I have exa	mined this Stat	tement and to	the best of	my knowledge a	nd belief it is true, correct	and complete.	
Signature of Candidate Date								
Pc	ollard, William, Cyrus, Mr., Jr.	[Electronically Filed]			tronically Filed1	07/11/2017		
				2=				
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)