

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) DAVID C KOLLER			2. Candidate's FEC Identification Number H4FL11071	
(b) Address (number and street) 3821 SE 22 PLACE		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code OCALA FL 34471		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation Dem	5. Office Sought House	6. State & District of Candidate FL 11		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) KOLLER FOR CONGRESS		
(b) Address (number and street) PO BOX 3683		
(c) City, State, and ZIP Code OCALA FL 34478		

### 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 DAVID C KOLLER  <i>[Electronically Filed]</i>	Date 04/22/2016
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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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