

Image# 202601309794634414

PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Luong, Tiffanie, Shavon, ,			2. Candidate's FEC Identification Number H6FL18220	
(b) Address (number and street) 1168 SE Palm Beach Rd		☐ Check if address changed		
(c) City, State, and ZIP Code Port Saint Lucie FL 34952		3. Is This Statement ☒ New (N) OR ☐ Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate FL 18		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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) Committee to Elect Tiffanie Luong		
(b) Address (number and street) PO Box 18		
(c) City, State, and ZIP Code Okeechobee FL 34973		

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 Luong, Tiffanie, Shavon, ,	Date 01/30/2026
--	--------------------

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

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