

FEC FORM 2

STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) PAUL SIDNEY ELLIOTT		2. Identification Number
(b) Address (number and street) P. O. BOX 274204		☐ Check if address changed
(c) City, State, and ZIP Code TAMPA, FLORIDA 33688-4204		3. Is This Statement ☒ New (N) OR ☐ Amended (A)
4. Party Affiliation NONE	5. Office Sought HOUSE OF REPRESENTATIVES	6. State & District of Candidate FLORIDA 12

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 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) PAUL ELLIOTT FOR CONGRESS
(b) Address (number and street) P. O. BOX 274204
(c) City, State, and ZIP Code TAMPA, FLORIDA 33688-4204

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 <i>Paul Sidney Elliott</i>	Date <i>6/6/2012</i>
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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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FEC FORM 2 (REV. 12/2008)

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Federal Election Commission
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Jm W

PREPARER
(3/2005)

6/14/12

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