

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) <u>Gina Christine LaBruno</u>		
(b) Address (number and street) <input type="checkbox"/> Check if address changed <u>4913 SE Wilbur Dr</u>		2. FEC Candidate Identification Number <u>To Be Assigned</u>
(c) City, State, and ZIP Code <u>Arcadia, FL 34266</u>		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation <u>Republican</u>	5. Office Sought <u>Congress</u>	6. State & District of Candidate <u>Florida's 17th Congressional District</u>

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) <u>Gina Christine LaBruno For Congress</u>
(b) Address (number and street) <u>P.O. Box 3420</u>
(c) City, State, and ZIP Code <u>Arcadia, FL 34265</u>

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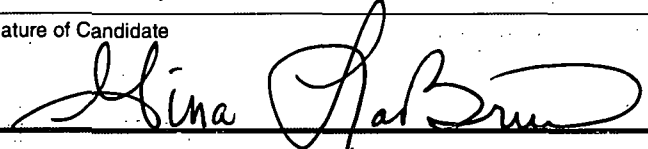
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

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) <u>Saving The Face Of Florida</u>
(b) Address (number and street) <u>P.O. Box 3420</u>
(c) City, State, and ZIP Code <u>Arcadia, FL 34265</u>

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 	Date <u>5/20/2019</u>
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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Gina Labruus

20. Box 3420

Arcadia, FL 34265

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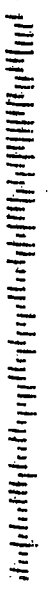
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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	5-28-19 DATE PREPARED

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