

Image# 201510309003254513

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Fatima Rita Fahmy		2. Candidate's FEC Identification Number H6FL10151
(b) Address (number and street) <input type="checkbox"/> Check if address changed 390 North Orange Avenue Suite 2300		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code Orlando FL 32801		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate FL 10

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) Fatima for Congress	
(b) Address (number and street) 390 North Orange Avenue Suite 2300	
(c) City, State, and ZIP Code Orlando FL 32801	

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 Fatima Rita Fahmy <i>[Electronically Filed]</i>	Date 10/30/2015
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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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