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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate							
Salazar, Maria, El							
(b) Address (number a 3725 West Flagler \$ #281		₹ I CI	heck if addre	ss changed		2. Candidate's FEC Ide H8FL27185	entification Number
(c) City, State, and ZIP	Code					3. Is This	lew Amended
Miami			FL	_ 331;	34	Statement (I	N) OR X (A)
4. Party Affiliation		5. Office Soug	ht		6. State & Dis	trict of Candidate	
REPUBLICAN PART	Υ	House			FL	27	
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIG	N COMMITTEE	
7. I hereby designate the	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election)						
NOTE: This designatio		iled with the ap	propriate offi	ce listed in	he instructions.		
(a) Name of Committee	e (in full)						
Salazar For	Congre	SS					
(b) Address (number a	nd street)						
3725 West Flagle #281	er Street						
(c) City, State, and ZIP	Code						
Miami					FL	33134	
8 I hereby authorize the		(I	ncluding Joir	nt Fundraisi	ng Representativ	,	xpend funds on behalf of my
candidacy.	iono in ilginan	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, թο.,	an dampaign do		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
NOTE: This designatio	n should be f	iled with the pri	ncipal campa	aign commit	tee.		
(a) Name of Committee	e (in full)						
Salazar Vic	tory Cor	nmittee					
(b) Address (number a							
3725 West Flagle	r Street						
#281 (c) City, State, and ZIP	Code						
Miami					FL	33134	
Wildin						00101	
I certify th	at I have exa	mined this State	ement and to	the best o	my knowledge a	and belief it is true, correc	t and complete.
Signature of Candidate			Date				
Salazar, Maria, Elvira, ,			07/15/2025				
NOTE: Submission of fals	e, erroneous	or incomplete	information r	nay subject	the person signi	ng this Statement to pena	Ilties of 2 U.S.C. §437g.
				1			

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTE	ES
(Including Joint Fundraising Representatives)	

3.	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)								
	GOP Winning Women 2024								
	(b) Address (number and street)								
	228 South Washington St Ste. 115								
	(c) City, State, and ZIP Code								
	Alexandria	VA	22101						
3.	I hereby authorize the following named committee, which is N	NOT my principal campaign co	ommittee, to receive and expend funds on behalf of my						
	candidacy. NOTE: This designation should be filed with the p	principal campaign committee							
	(a) Name of Committee (in full)								
	American Battleground Fund								
	(b) Address (number and street)								
	PO Box 30844								
	(c) City, State, and ZIP Code								
	Bethesda	MD	20824						
3.	I hereby authorize the following named committee, which is N	NOT my principal campaign co	ommittee, to receive and expend funds on behalf of my						
	candidacy. NOTE: This designation should be filed with the $\ensuremath{\text{p}}$	orincipal campaign committee							
	(a) Name of Committee (in full)								
	Hispanic Leadership Trust Partnership								
	(b) Address (number and street)								
	1005 Congress Ave Ste 400								
	(c) City, State, and ZIP Code								
	Austin	TX	78701						
3.	I hereby authorize the following named committee, which is N candidacy. NOTE : This designation should be filed with the p								
	(a) Name of Committee (in full)								
	GOP Winning Women 2026								
	(b) Address (number and street)								
	228 S Washington St								
	Ste. 115 (c) City, State, and ZIP Code								
	Alexandria	VA	22314						