

Image# 202602279837871545

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Valimont, Jennifer, Gay, ,		2. Candidate's FEC Identification Number H4FL01197	
(b) Address (number and street) PO Box 1258		<input type="checkbox"/> Check if address changed	
(c) City, State, and ZIP Code Gulf Breeze FL 32562		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)	
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate FL 01	

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) Gay Valimont For Florida	
(b) Address (number and street) PO Box 1258	
(c) City, State, and ZIP Code Gulf Breeze FL 32562	

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 Valimont, Jennifer, Gay, ,	Date 02/27/2026
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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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