

FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Weeks, David, Kenneth, ,			2. Candidate's FEC Identification Number		
(b) Address (number and street) 112 West Curtis Street		<input type="checkbox"/> Check if address changed			
(c) City, State, and ZIP Code Tampa FL 33603		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)			
4. Party Affiliation UN	5. Office Sought Senate		6. State & District of Candidate FL 00		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) Principal Campaign Committee of David Weeks US Senate Campaign Florida 2018		
(b) Address (number and street) 112 West Curtis Street		
(c) City, State, and ZIP Code Tampa FL 33603		

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		

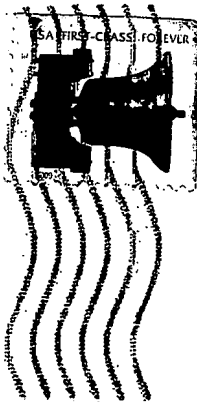
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Weeks, David, Kenneth, , 	Date 03/15/2018
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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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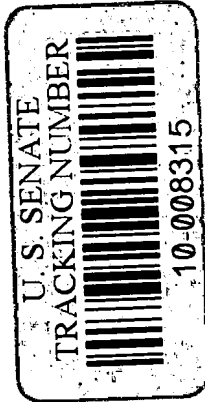
David Weeks
112 West Curtis Street
Tampa, Florida 33603



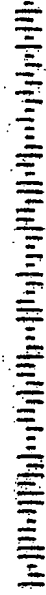
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United States Senate

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AIRBORNE EXPRESS	_____	<input type="checkbox"/>

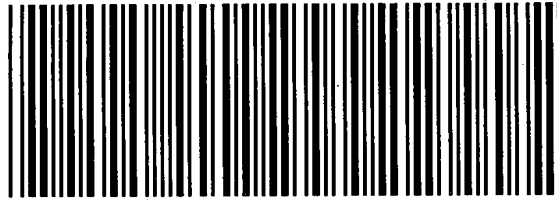
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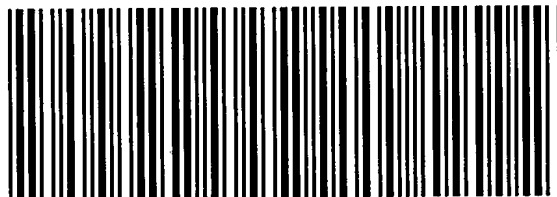
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