

Image# 202103049440166570

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Murphy, Stephanie, , ,		2. Candidate's FEC Identification Number H6FL07140
(b) Address (number and street) <input type="checkbox"/> Check if address changed PO Box 205		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code Winter Park FL 32790-0205		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate FL 07

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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) Stephanie Murphy for Congress		
(b) Address (number and street) PO Box 205		
(c) City, State, and ZIP Code Winter Park FL 32790-0205		

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) Murphy Action Fund		
(b) Address (number and street) PO Box 205		
(c) City, State, and ZIP Code Winter Park FL 32790-0205		

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 Murphy, Stephanie, , , <i>[Electronically Filed]</i>	Date 03/04/2021
--	---------------------------

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--

Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

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)

Murphy Victory Fund

(b) Address (number and street)

PO Box 205

(c) City, State, and ZIP Code

Winter Park

FL

32790-0205

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)

VoteVets 2022

(b) Address (number and street)

PO Box 11293

(c) City, State, and ZIP Code

Portland

OR

97211

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

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