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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Gould, Charles aka Alex, A, ,						
	(b) Address (number and street) 7901 4th St N STE 300	☐ Check if address changed				Candidate's FEC Identification Number     S6FL00699	
	(c) City, State, and ZIP Code					3. Is This New Amended	1
	St. Petersburg	FL 33702			2	Statement X (N) OR (A)	
4.	Party Affiliation	5. Office Soug				trict of Candidate	
	DEMOCRATIC PARTY	Senate			FL	00	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE							
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election)						
	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
	(a) Name of Committee (in full)						
Committee to Elect Alex Gould							
	(b) Address (number and street)						
	7901 4th St N STE 300						
	(c) City, State, and ZIP Code						
	St. Petersburg				FL	33702	
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						
							_
		mined this Sta	tement and to	the best of	my knowledge a	and belief it is true, correct and complete.	
Signature of Candidate					Date	_	
Gould, Charles aka Alex, A, ,					04/23/2025		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.							
							_
		1		1	1		

FEC FORM 2 (REV. 02/2009)

## : 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: F2N Transaction ID:

Charles Gould goes by Alex Gould.

Form/Schedule: Transaction ID: