

Image# 202011099336973576

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Keith, Pamela, M., ,		
(b) Address (number and street) 4706 Matanzas Ave		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Fort Pierce FL 34946		2. Candidate's FEC Identification Number H0FL18207
4. Party Affiliation DEMOCRATIC PARTY		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
5. Office Sought House	6. State & District of Candidate FL 18	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) Committee to Elect Pam Keith		
(b) Address (number and street) 2006 Avenue Q		
(c) City, State, and ZIP Code Fort Pierce FL 34950		

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) Twelfth Amendment Defenders Fund		
(b) Address (number and street) PO Box 5418		
(c) City, State, and ZIP Code Takoma Park MD 20913		

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 Keith, Pamela, M., , [Electronically Filed]	Date 11/09/2020
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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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Optional Supplemental Page for Designation
of Additional Authorized CommitteesPage 2 of 2

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)

Pam Keith Victory Fund

(b) Address (number and street)

PO Box 60558

(c) City, State, and ZIP Code

Philadelphia

PA

19145

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)

Representation Matters V

(b) Address (number and street)

910 17th St NW

Ste 925

(c) City, State, and ZIP Code

Washington

DC

20006

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)

Serve America Victory Fund

(b) Address (number and street)

PO Box 313

(c) City, State, and ZIP Code

Maricopa

AZ

85138

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