

Image# 202411189719988598

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Slater, Christopher, K, ,		
(b) Address (number and street) 639 MERIONETH CT NE		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code FORT WALTON BEACH FL 32547		2. Candidate's FEC Identification Number H6FL01283
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House
6. State & District of Candidate FL 01		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2025 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) Slater for Congress		
(b) Address (number and street) 639 MERIONETH CT NE		
(c) City, State, and ZIP Code FORT WALTON BEACH FL 32547		

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 Slater, Christopher, , ,	Date 11/18/2024
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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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Transaction ID :

2025 Special Election.

Form/Schedule:
Transaction ID: