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FEC FORM 2

STATEMENT OF CANDIDACY

_	())) () () () () () () () ()									
1.	(a) Name of Candidate (in full)									
	McCloy, John, , ,									
	(b) Address (number and street) 18848 US HWY 441 #1005	☐ Check if address changed				Candidate's FEC Identification Number H4FL11097				
	(c) City, State, and ZIP Code					3. Is This		•W	Amended	
	Mount Dora					Statem	ent X (N) OR	(A)	
4.	Party Affiliation	5. Office Soug	jht		6. State & Dist	rict of Candid	ate			
	REPUBLICAN PARTY	House			FL	11				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full)									
John McCloy for Congress										
(b) Address (number and street) 18848 US HWY 441 #1005										
	(c) City, State, and ZIP Code									
	Mount Dora				FL	32757				
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.										
Si	gnature of Candidate					Date				
M	cCloy, John, , ,		[Electronically Filed]				07/05/2023			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										

FEC FORM 2 (REV. 02/2009)