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FEC FORM 2 STATEMENT OF CANDIDACY.

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1. (a) Name of Candidate (in full) Thuy Lowe			2. Identification Number		
(b) Address (number and street) <input type="checkbox"/> Check if address changed 31622 Bronson Road (P.O. Box 1555)					
(c) City, State, and ZIP Code Sorrento FL 32776			3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation Republican	5. Office Sought House	6. State & District of Candidate FL. 05			

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 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) Thuy Lowe for Congress		
(b) Address (number and street) 31622 Bronson Rd. (P.O. Box 1555)		
(c) City, State, and ZIP Code Sorrento FL. 32776		

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) Thuy Lowe for Congress		
(b) Address (number and street) 31622 Bronson Rd. (P.O. Box 1555)		
(c) City, State, and ZIP Code Sorrento FL. 32776		

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 	Date 10/5/13
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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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FEC FORM 2 (REV. 12/2008)

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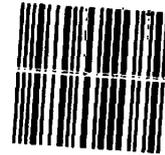
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DATE PREPARED

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