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FEC FORM 2

STATEMENT OF CANDIDACY

4 ())) () () () () () () ()								
1. (a) Name of Candidate (in full)								
Lynn, Eric, , ,	Chook if address the said				2. Condidate a FFC Identification Number			
(b) Address (number and street) PO Box 16991	☐ Check if address changed				Candidate's FEC Identification Number H6FL13189			
(c) City, State, and ZIP Code					3. Is This	Ne		Amended
St. Petersburg	FL 33733			Statemer	nt 🗶 (N)	OR	(A)	
4. Party Affiliation	5. Office Sought				trict of Candidat	te		_
DEMOCRATIC PARTY	House			FL	13			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)								
NOTE: This designation should be filed with the appropriate office listed in the instructions.								
(a) Name of Committee (in full)								
Eric Lynn for Congre	ess							
(b) Address (number and street) PO Box 16991								
1 6 Box 10001								
(c) City, State, and ZIP Code								
St. Petersburg				FL	33733			
DESIGNATION OF OTHER AUTHORIZED COMMITTEES								
(Including Joint Fundraising Representatives)								
8. I hereby authorize the following name candidacy.	ned committee, whic	ch is NOT	my principa	al campaign cor	mmittee, to rece	eive and exp	end funds	on behalf of my
NOTE: This designation should be f	iled with the principa	al campaiç	gn committe	ee.				
(a) Name of Committee (in full)								
(4) 14								
(b) Address (number and street)								
(a) City Otata and 7ID Code								
(c) City, State, and ZIP Code								
I certify that I have exa	mined this Stateme	nt and to t	the best of i	ny knowledge a	and belief it is tr	ue, correct a	and compl	ete.
Signature of Candidate					Date			
Lynn, Eric, , , [Electronically Filed]					05/05/2021			
			[Elect	ronically Fileaj	00,00,2021			
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. 02/2009)