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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
	OZ, MEHMET, , DR,  (b) Address (number and street)				O Condidate a FFO Identification Number					
	2771 PHILMONT AVE	☐ Check if address changed			Candidate's FEC Identification Number     S2PA00638					
	(c) City, State, and ZIP Code					3. Is This			v	Amended
	HUNTINGTON VALLEY		PA	1900	-	Stater	,	) OR	X	(A)
4.		5. Office Sough	t		6. State & Dist	rict of Candi	date			
	REPUBLICAN PARTY	Senate			PA					
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	I hereby designate the following na	med political com	nmittee as m	y Principal (	Campaign Comr	mittee for the	$\frac{2022}{\text{(year of election)}}$		tion(s).	
	NOTE: This designation should be	filed with the app	ropriate offic	ce listed in t	ne instructions.					
	(a) Name of Committee (in full)  DOCTOR OZ FOR SENATE									
	(b) Address (number and street) 2771 PHILMONT AVE									
	(c) City, State, and ZIP Code									
	HUNTINGTON VALLEY				PA	19006	3			
	HOITING FOIL VALLE									
						_				
	DE	SIGNATION		_	THORIZED g Representativ		TEES			
			-		•	,				
8.	I hereby authorize the following naticandidacy.	ned committee, v	which is NO	Г my princip	al campaign con	nmittee, to re	eceive and ex	pend fund	ds on bel	nalf of my
	NOTE: This designation should be	filed with the prin	cipal campa	ign committ	ee.					
	(a) Name of Committee (in full)									
	(b) Address (number and street)									
	(c) City, State, and ZIP Code									
	(o) only, oldio, and 2ii oode									
	I certify that I have ex	amined this State	ment and to	the best of	my knowledge a	and belief it is	s true, correct	and com	plete.	
Si	gnature of Candidate					Date				
	Z, MEHMET, , DR,					06/07/20	122			
				[Elec	tronically Filed]	00/01/20	122			
NO	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									
							1			

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

Page	<sup>2</sup> of	2

## **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. <b>NOTE</b> : This designation should be filed with the principal campaign committee.									
	(a) Name of Committee (in full)									
	CORNYN VICTORY COMMITTEE									
	(b) Address (number and street) PO Box 13026									
	(c) City, State, and ZIP Code			-						
	Austin	TX	78711							
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. <b>NOTE</b> : This designation should be filed with the principal camp									
	(a) Name of Committee (in full)	E ELIND O	000							
	OZ FOR PA SENATE REPUBLICAN NOMINEI	E FUND 20	022							
	(b) Address (number and street) PO BOX 9891									
	(c) City, State, and ZIP Code									
	ARLINGTON	VA	22219							
8.	I hereby authorize the following named committee, which is NOT my principle candidacy. NOTE: This designation should be filed with the principal camporal (a) Name of Committee (in full)  (b) Address (number and street)									
	(c) City, State, and ZIP Code									
8.	I hereby authorize the following named committee, which is NOT my princip candidacy. <b>NOTE</b> : This designation should be filed with the principal camp									
	(a) Name of Committee (in full)									
	(b) Address (number and street)									
	(c) City, State, and ZIP Code									