FEC FORM 2 STATEMENT OF CANDIDACY

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1.	(a) Name of Candidate (in full) FLORA, DEBORAH, , ,						
	(b) Address (number and street) 17011 LINCOLN AVE #401	□ Check if address changed			2. Candidate's FEC Identification Number H4CO04199		
	(c) City, State, and ZIP Code PARKER	CO 80134		3. Is This Statement X (N) OR	Amended (A)		
4.	Party Affiliation	5. Office Sought	-	6. State & Dist	rict of Candidate		
	REPUBLICAN PARTY	House		CO	04		
_		SIGNATION OF PR	-			()	
7.	(year of election)						
	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
(a) Name of Committee (in full)							
	DEBORAH FLORA	FOR CONGRES	S				
	(b) Address (number and street)						
	17011 LINCOLN AVE #401						
	(c) City, State, and ZIP Code						
	PARKER			CO	80134		
	DE	SIGNATION OF O	THER AU	THORIZED	COMMITTEES		
		(Including Jo	int Fundraisir	ig Representative	es)		
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 f	iled with the principal camp	aign committ	ee.			
	(a) Name of Committee (in full)						
	(b) Address (number and street)						
	(c) City, State, and ZIP Code						
	-	mined this Statement and	to the best of	my knowledge a	nd belief it is true, correct and complete	9.	
Signature of Candidate					Date		
F	FLORA, DEBORAH, , ,				11/02/2023		
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N	OTE: Submission of false. erroneous	, or incomplete information	may subject t	the person signir	ig this Statement to penalties of 2 U.S.		
						C. §437g.	
						C. §437g.	
						C. §437g.	