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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Hawatmeh, Ola, Nesheswat, ,		
(b) Address (number and street) 41 Madison Ave Suite 2R		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Kingston NY 12401		2. Candidate's FEC Identification Number H6FL19160
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House
6. State & District of Candidate FL 19		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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) POEPLER FOR OLA		
(b) Address (number and street) 41 MADISON AVE SUITE 2R		
(c) City, State, and ZIP Code KINGSTON NY 12401		

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) Ola Victory Fund		
(b) Address (number and street) 2301 Del Prado Blvd S Ste 690 #118		
(c) City, State, and ZIP Code Cape Coral FL 33990		

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 Hawatmeh, Ola, Nesheswat, ,	Date 09/24/2025
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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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