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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Rivera, Angel, , ,			2. Candidate's FEC Identification Number H4FL09174	
(b) Address (number and street) 4767 New Broad Street		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Orlando FL 32814		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate FL 09		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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) Angel Rivera For Congress		
(b) Address (number and street) 4767 New Broad Street		
(c) City, State, and ZIP Code Orlando FL 32814		

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)		
(b) Address (number and street)		
(c) City, State, and ZIP Code		

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 Rivera, Angel, , ,	Date 08/17/2023
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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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