FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)
   joarder, ehsan, , ,

(b) Address (number and street)
308 black walnut rd
#407

☐ Check if address changed

2. Candidate's FEC Identification Number
H4FL14158

(c) City, State, and ZIP Code
brooksville   FL   34604

3. Is This Statement   ☐ New (N)   OR   ☒ Amended (A)

4. Party Affiliation	5. Office Sought	6. State & District of Candidate
REPUBLICAN PARTY	House	FL 06

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)

JOARDER FOR CONGRESS

(b) Address (number and street)

2238 PASSION FLOWER WAY
#202

(c) City, State, and ZIP Code

ODESSA   FL   33556

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	Date
joarder, ehsan, , mr,	11/25/2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

FEC FORM 2 (REV. 02/2009)

: 97 ˙A=G79 @@5 B9CI G˙H9LH˙F9 @5 H98 ˙HC ˙5 ˙F9DCFH˙G7<98I @9˙CF˙+9A=N5H=CB

Form/Schedule: F2A
Transaction ID :

2024 Special Election.

Form/Schedule:
Transaction ID: