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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Piper, Mark, , ,						
	(b) Address (number and street) 401 Possum Pass	☐ Check if address changed				Candidate's FEC Identification Number H4FL23134	
	(c) City, State, and ZIP Code						ew Amended
	West Palm Beach	FL 33413			3	Statement X (N) OR (A)
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	rict of Candidate	
	DEMOCRATIC PARTY	House			FL	23	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE							
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)						
	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
	(a) Name of Committee (in full)						
	USFL23						
	(b) Address (number and street)						
	410 SOUTH 26TH AVE						
	(c) City, State, and ZIP Code						
	HOLLYWOOD				FL	33020	
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							
0.	candidacy.	ied committee,	WIIICII IS INO	T my pimoi	ar campaigir con	minitiee, to receive and ex	pend runds on behall of my
	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		
Piper, Mark, , ,					04/17/2024		
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)