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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) ROBERT LAWRENCE ROBEY

(b) Address (number and street) ☒ Check if address changed
1097 HOWELL HARBOR DRIVE

2. Candidate's FEC Identification Number
H0FL24106

(c) City, State, and ZIP Code
CASSELBERRY, FL 32707

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

4. Party Affiliation: REP

5. Office Sought: U.S. CONGRESS

6. State & District of Candidate: FLORIDA DISTRICT 24

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2010 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)
BOB ROBEY FOR CONGRESS

(b) Address (number and street)
5703 RED BUG LAKE RD #309

(c) City, State, and ZIP Code
WINTER SPRINGS, FL 32708-4969

### 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 |
|---|---|
| Robert L Robey | 12/12/09 |

**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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Federal Election Commission
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