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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full) BALLARD, MICHAEL, , ,										
	(b) Address (number and street) 519 W LOCUST ST	heck if addre	ss changed		Candidate's FEC Identification Number H0OK05296						
	(c) City, State, and ZIP Code					3. Is This	New			Amended	
	TECUMSEH		Oh	7487		Statement	x (N)	OR		(A)	
4.	Party Affiliation REPUBLICAN PARTY	Office Soug House	ht		6. State & Dist OK	rict of Candidate 05					
_					-						
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) MICHAEL BALLARD FOR CONGRESS											
	(b) Address (number and street) 519 W LOCUST ST										
	(c) City, State, and ZIP Code										
	TECUMSEH				OK	74873					
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						
B	ALLARD, MICHAEL, , ,			[Elec	tronically Filed]	04/03/2020					
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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FEC FORM 2 (REV. 02/2009)