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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a	a) Name of Candidate (in full)							
	Case, Jim, , ,							
(b	o) Address (number and street) 102 N Gospel St. #4	□Chec	k if address c	hanged		Candidate's FEC Identification Number H4IN08280		
(c	c) City, State, and ZIP Code					3. Is This New Amend	ed	
	Paoli		IN	47454	1	Statement X (N) OR (A)		
4. Pa	arty Affiliation	5. Office Sought			6. State & Dist	rict of Candidate		
F	REPUBLICAN PARTY	House			IN	08		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7. 11	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	a) Name of Committee (in full)							
	JIM CASE FOR CO	NGRESS IN	С					
(b	o) Address (number and street)							
	102 N Gospel St.							
	#4							
(c	c) City, State, and ZIP Code							
	Paoli				IN	47454		
	DE	CICNIATION	OF OTHE	D A I I I	LIODIZED	COMMITTEES		
	DE			_	_	COMMITTEES		
(Including Joint Fundraising Representatives)								
	hereby authorize the following nan andidacy.	ned committee, wh	ich is NOT my	/ principa	al campaign con	nmittee, to receive and expend funds on behalf of m	/	
NOTE: This designation should be filed with the principal campaign committee.								
(a) Name of Committee (in full)								
(0	a) Hame of Committee (in rail)							
(b	o) Address (number and street)							
(c	c) City, State, and ZIP Code							
(c	c) City, State, and ZIP Code							
(c	c) City, State, and ZIP Code							
(c		mined this Statem	ent and to the	best of r	my knowledge a	nd belief it is true, correct and complete.		
		mined this Statem	ent and to the	best of r	ny knowledge a	nd belief it is true, correct and complete. Date		
Sign	I certify that I have exa	mined this Statem	ent and to the	best of r	ny knowledge a	Date		
Sign	I certify that I have exa	mined this Statem	ent and to the	best of r	ny knowledge a			
Sign	I certify that I have exa	mined this Statem	ent and to the	best of r	my knowledge a	Date		
Sign Case	I certify that I have exanature of Candidate e, Jim, , ,					Date		
Sign Case	I certify that I have exanature of Candidate e, Jim, , ,					Date 02/24/2024		
Sign Case	I certify that I have exanature of Candidate e, Jim, , ,					Date 02/24/2024		

FEC FORM 2 (REV. 02/2009)