Image# 202011259337135057 PAGE 1 / 1

## FEC FORM 2

## STATEMENT OF CANDIDACY

	(a) Name of Candidate (in full)						
١.	(a) Name of Candidate (in full)  Tiffany, Tom, , ,						
	(b) Address (number and street)	□ Check	if address o	hanged		2. Candidate's FEC Identification Number	
	9463 Backwoods Lane	_ Onco	i i dddi coo c	mangea		H0WI07101	
	(c) City, State, and ZIP Code					3. Is This New Amended	
	Minocqua		WI	54548	3-3401	Statement (N) OR (A)	
4.	Party Affiliation	5. Office Sought			6. State & Dist	rict of Candidate	
	REPUBLICAN PARTY	House			WI	07	
	DE	SIGNATION (	OF PRING	CIPAL	CAMPAIGN	N COMMITTEE	
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)						
	NOTE: This designation should be f	led with the approp	riate office li	isted in th	e instructions.		
	(a) Name of Committee (in full)						
	Tiffany for Wisconsi	n, Inc.					
	(b) Address (number and street)						
	PO Box 1007						
	(c) City, State, and ZIP Code						
	Wausau				WI	54402-1007	
	DE					COMMITTEES	
		(Inclu	ding Joint Fi	undraisin	g Representativ	es)	
	I hereby authorize the following nam candidacy.	ned committee, which	ch is NOT m	y principa	al campaign con	nmittee, to receive and expend funds on behalf of my	
	•					nmittee, to receive and expend funds on behalf of my	
	candidacy.					nmittee, to receive and expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f					nmittee, to receive and expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)					nmittee, to receive and expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f					nmittee, to receive and expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)					nmittee, to receive and expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)					nmittee, to receive and expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)					nmittee, to receive and expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)					nmittee, to receive and expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code	led with the princip	al campaign	committe	ee.		
_	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code	led with the princip	al campaign	committe	ee.	and belief it is true, correct and complete.	
Siç	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate	led with the princip	al campaign	committe	ee.	and belief it is true, correct and complete.  Date	
Siç	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code	led with the princip	al campaign	committee	ee.	and belief it is true, correct and complete.	
Siç	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate	led with the princip	al campaign	committee	ny knowledge a	and belief it is true, correct and complete.  Date	
Siç	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate  (flany, Tom, , ,	led with the princip	al campaign	e best of t	ny knowledge a	and belief it is true, correct and complete.  Date	
Sig	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate  (flany, Tom, , ,	led with the princip	al campaign	e best of t	ny knowledge a	and belief it is true, correct and complete.  Date  11/25/2020	
Siç	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate  (flany, Tom, , ,	led with the princip	al campaign	e best of t	ny knowledge a	and belief it is true, correct and complete.  Date  11/25/2020	

FEC FORM 2 (REV. 02/2009)