

Image# 202403079622346071

FEC FORM 2  
STATEMENT OF CANDIDACY

|                                                                                                          |  |                                                       |
|----------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------|
| 1. (a) Name of Candidate (in full)<br>Corsetti, Todd, Alan, ,                                            |  |                                                       |
| (b) Address (number and street)<br>7732 W Buckskin Road                                                  |  | <input type="checkbox"/> Check if address changed     |
| (c) City, State, and ZIP Code<br>Pocatello                                                               |  | ID 83201                                              |
| 4. Party Affiliation<br>LIBERTARIAN                                                                      |  | 5. Office Sought<br>House                             |
| 6. State & District of Candidate<br>ID 02                                                                |  | 2. Candidate's FEC Identification Number<br>H4ID02113 |
| 3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A) |  |                                                       |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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)<br>Corsetti for Congress |  |  |
| (b) Address (number and street)<br>7732 W Buckskin Road  |  |  |
| (c) City, State, and ZIP Code<br>Pocatello               |  |  |
| ID 83201                                                 |  |  |

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<br>Corsetti, Todd, Alan, , | Date<br>03/07/2024 |
|---------------------------------------------------|--------------------|

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

|  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|