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FEC FORM 2

STATEMENT OF CANDIDACY

4											
١.	(a) Name of Candidate (in full)										
	Willert, Victor, , Mr., (b) Address (number and street)		ock if address	changed		2 Candidate's	FEC Identific	ration Ni	ımher		
	207 Sandhill Crane Ave.					Candidate's FEC Identification Number H4NV01229					
	(c) City, State, and ZIP Code					3. Is This	New			mended	
	Henderson		NV	89002		Statement	X (N)	OR	(A	١)	
4.	Party Affiliation	5. Office Sought			6. State & Dist	rict of Candidate 01					
	REPUBLICAN PARTY	House			INV						
	DE	SIGNATION	OF PRIN	CIPAL	CAMPAIG	N COMMITTI	EE				
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2004 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)										
	Friends for Victor W	illert/ Victor	4 Nevad	a							
	(b) Address (number and street)										
	207 Sandhill Crane Ave.										
	(c) City, State, and ZIP Code										
	Henderson				NV	89002					
	DE	SIGNATION		-D A117	LIODIZED	COMMITTE	EG				
				_	g Representativ		L 3				
8	I hereby authorize the following nam	ned committee w	hich is NOT m	ny principa	al campaign con	nmittee to receive	e and expend	d funds (on hehal	of my	
٠.	candidacy.	,		., թо.թ.	ar campaign co		o and onpoin	a . a a .	o., 20, a.	oy	
	NOTE: This designation should be f	led with the princ	cipal campaigr	n committe	ee.						
	(a) Name of Committee (in full)										
	(b) Address (number and street)										
	(c) City, State, and ZIP Code										
	(c) City, State, and ZIP Code										
	(c) City, State, and ZIP Code										
	(c) City, State, and ZIP Code I certify that I have example 1.	mined this Stater	ment and to th	e best of r	ny knowledge a	and belief it is true	e, correct and	l comple	te.		
Si		mined this Stater	ment and to th	e best of r	ny knowledge a	and belief it is true	e, correct and	l comple	te.		
	I certify that I have exa	mined this Stater	ment and to th	e best of r	my knowledge a		e, correct and	l comple	te.		
	I certify that I have exa	mined this Stater	ment and to th	e best of I	ny knowledge a	Date	e, correct and	l comple	te.		
и	I certify that I have exa gnature of Candidate Villert, Victor, , Mr.,					Date 08/31/2023					
и	I certify that I have exa					Date 08/31/2023					
и	I certify that I have exa gnature of Candidate Villert, Victor, , Mr.,					Date 08/31/2023				g.	

FEC FORM 2 (REV. 02/2009)