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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Amash, Justin, , ,						
	(b) Address (number and street) 5557 28th St SE Ste B PMB 325	□С	heck if addres	ss changed		Candidate's FEC Identification Number     S4MI00694	
	(c) City, State, and ZIP Code					3. Is This New Amended	
	Grand Rapids		MI	4951	2	Statement X (N) OR (A)	
4.	Party Affiliation	5. Office Soug	ht			trict of Candidate	
	REPUBLICAN PARTY	Senate			MI	00	
	DE	SIGNATIO	N OF PRI	INCIPAL	CAMPAIG	N COMMITTEE	
7.	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 f	iled with the ap	propriate offic	ce listed in th	ne instructions.		
	(a) Name of Committee (in full)						
	JUSTIN AMASH FO	R SENAT	Έ				
	(b) Address (number and street)						
	5557 28TH ST SE STE B PM	B 325					
	(c) City, State, and ZIP Code						
	GRAND RAPIDS				MI	49512	
_							
	DE				THORIZED g Representativ	COMMITTEES (PS)	
		·					
	I hereby authorize the following nan candidacy.	ned committee,	which is NO	Γ my principa	al campaign co	mmittee, to receive and expend funds on behalf of my	
	NOTE: This designation should be f	iled with the pri	ncipal campa	ign 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						
		mined this Stat	ement and to	the best of	my knowledge a	and belief it is true, correct and complete.	
		mined this Stat	ement and to	the best of	my knowledge a	and belief it is true, correct and complete.  Date	
Sig	I certify that I have exa	mined this Stat	ement and to	the best of	my knowledge a		
Sig	I certify that I have exa	mined this Stat	ement and to	the best of	my knowledge a	Date	
Sig	I certify that I have exa	mined this Stat	ement and to	the best of	my knowledge a	Date	
Siç	I certify that I have exa gnature of Candidate nash, Justin, , ,					Date	
Siç	I certify that I have exa gnature of Candidate nash, Justin, , ,					Date 03/02/2024	
Siç	I certify that I have exa gnature of Candidate nash, Justin, , ,					Date 03/02/2024	

FEC FORM 2 (REV. 02/2009)