## FEC FORM 2 STATEMENT OF CANDIDACY

|  |                               |   |                       |                           | ·                         |
|--|-------------------------------|---|-----------------------|---------------------------|---------------------------|
| 1. (a) Name of Candidate (in full)   | Sean                          | R   | - 2022 TIME S         | 1 Anti: 12                | <u> </u>                  |
|  | Ben Apple                     | ess changed                                 |                       | Candidate Identification  | Number                    |
| (c) City, State, and ZIP Code  |                               |   |                       | tement 🔀 (N) 🕻            | OR Amended (A)            |
| 4. Party Affiliation REP   | 5. Office Sought              | touse 6. St                                 | ate & District of Car | <sup>ndidate</sup> WA     | 5++                       |
| D  | ESIGNATION OF P               |   |                       | MITTEE                    |                           |
| 7. I hereby designate the following n  | amed political committee as   | my Principal Campa                          | ign Committee for I   | the 2022 e                | lection(s).               |
| NOTE: This designation should be   |                               |   |                       | (year of election)        |                           |
| (a) Name of Committee (in full)  |                               | • • -                                       |                       |                           |                           |
|  | CLYNC                         | -HF   | OR                    | CONGR                     | ESS                       |
| (b) Address (number and street)  |                               | <b>"</b> "                                  |                       | .))                       |                           |
|  | 14410                         | ς,  | Ben H                 | pple Way                  |                           |
| (c) City, State, and ZIP Code  |                               |   |                       | 0.0                       |                           |
|  | Egmall                        |   | WA                    | 44                        | 008                       |
| <ol> <li>I hereby authorize the following na candidacy.</li> <li>NOTE: This designation should be</li> </ol> | amed committee, which is N    | int Fundraising Rep<br>DT my principal carr | resentatives)         | -                         | unds on behalf of my      |
| (a) Name of Committee (in full)  |                               |   |                       |                           |                           |
| (b) Address (number and street)<br>(c) City, State, and ZIP Code   |                               |   |                       |                           |                           |
|  |                               | ·   | •                     |                           |                           |
| I certify that I have ex   | amined this Statement and t   | o the best of my kn                         | wledge and belief     | it is true, correct and c | omplete.                  |
| Signature of Candidate   | 1. 1. April                   | 1   | Date                  | 05/17                     | 2022                      |
| NOTE: Submission of false, erroneou  | us, or incomplete information | may subject the pe                          | rson signing this St  | atement to penalties of   | 52 U.S.C. §30109.         |
| 9-00068  |                               |   |                       |                           | FEC FORM 2 (REV. 02/2009) |

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| I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of m 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  | DESIGNATION OF OTHER AUTHORIZED COMMITTEES  |                                       |                          |             |                     |                 |                   |  |
|--|---|---------------------------------------|--------------------------|-------------|---------------------|-----------------|-------------------|--|
| Ali         (b) Address (number and street)         (c) City, State, and ZiP Code         (a) Name of Committee (in full)         (b) Address (number and street)         (c) City, State, and ZiP Code         (d) Name of Committee (in full)         (e) City, State, and ZiP Code         (f) Address (number and street)         (g) City, State, and ZiP Code         (h) Address (number and street)         (i) Address (number and street)         (ii) Address (number and street)         (iii) City, State, and ZiP Code         (iii) Address (number and street)         (iii) Name of Committee (in full)         (b) Address (number and street)   | I hereby authorize the following named commit   | ttee, which is NOT my p               | rincipal cam             | paign commi | ttee, to receive a  | nd expend fund  |                   |  |
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| (c) City, State, and ZIP Code  (c) City, State, and ZIP Code (c) City, State  | A 1 7   |                                       |                          | -           |                     | 11 6            |                   |  |
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Sean Chinch 14910 S Ben Apple Way Edwall, WA 99008

25 MAY 2022 PM 3 L SPOKANE WIA 990

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| Federal Election Commission<br>ENVELOPE REPLACEMENT PAGE FOR INCOMI<br>The FEC added this page to the end of this filing to indica |                           |
|--|---------------------------|
| Hand Delivered   | Date of Receipt           |
| USPS First Class Mail 5/25/22_   | Date of Receipt $5/31/22$ |
| USPS Registered/Certified  | Postmarked (R/C)          |
| USPS Priority Mail   | Postmarked                |
| USPS Priority Mail Express   | Postmarked                |
| Postmark Illegible   |                           |
| No Postmark  |                           |
| Overnight Delivery Service (Specify):  | Shipping Date             |
| Next Busi  | ness Day Delivery         |
| Received from House Records & Registration Office  | Date of Receipt           |
| Received from Senate Public Records Office   | Date of Receipt           |
| Received from Electronic Filing Office   | Date of Receipt           |
| Date of Other (Specify):   | of Receipt or Postmarked  |
| PREPARER MP<br>(3/2015)  | G/1/22<br>DATE PREPARED   |

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