

Image# 202601179794029087

PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Lehman, Joseph, , ,		
(b) Address (number and street) PO Box 41		<input checked="" type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Lebanon		OR 97355
4. Party Affiliation LIBERTARIAN		5. Office Sought House
6. State & District of Candidate OR 05		2. Candidate's FEC Identification Number H6OR05200
3. Is This Statement		<input type="checkbox"/> New (N) OR <input checked="" 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 2026 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) LEHMAN CAMPAIGN COMMITTEE		
(b) Address (number and street) P.O. BOX 41		
(c) City, State, and ZIP Code LEBANON OR 97355		

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 Lehman, Joseph, , ,	Date 01/17/2026
---	--------------------

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

--	--	--	--	--	--	--	--	--