

Image# 202208269528253153

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Kistner, Tyler, , ,			2. Candidate's FEC Identification Number HOMN02134	
(b) Address (number and street) 14870 Granada Ave Ste. 1035		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Apple Valley MN 55124		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate MN 02		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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) KISTNER FOR CONGRESS		
(b) Address (number and street) 14870 GRANADA AVE STE 1035		
(c) City, State, and ZIP Code APPLE VALLEY MN 55124-5514		

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) Kistner Victory Committee		
(b) Address (number and street) PO Box 183		
(c) City, State, and ZIP Code Hudson WI 54016		

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 Kistner, Tyler, , , [Electronically Filed]	Date 08/26/2022
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

TAKE BACK MN-02 REPUBLICAN NOMINEE FUND 2022

(b) Address (number and street)

PO BOX 30844

(c) City, State, and ZIP Code

BETHESDA

MD

20824

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)

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(c) City, State, and ZIP Code