FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)

   Simpson, Michael, , ,

   (b) Address (number and street)   ☐ Check if address changed
   1487 Parkway Drive

2. Candidate's FEC Identification Number
   H8ID02064

   (c) City, State, and ZIP Code
   Blackfoot   ID   83221-1667

3. Is This Statement   ☒ New (N)   **OR**   ☐ Amended (A)

4. Party Affiliation
   REPUBLICAN PARTY

5. Office Sought
   House

6. State & District of Candidate
   ID   02

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the ___2024___ 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)

   SIMPSON FOR CONGRESS

   (b) Address (number and street)
   1487 Parkway Drive

   (c) City, State, and ZIP Code

   Blackfoot   ID   83221-1667

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)

   RISE PROJECT

   (b) Address (number and street)
   PO Box 2485

   (c) City, State, and ZIP Code

   Springfield   VA   22152-0485

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	**Date**
Simpson, Michael, , , **[Electronically Filed]**	01/19/2023

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

FEC FORM 2 (REV. 02/2009)

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