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FEC FORM 2

STATEMENT OF CANDIDACY

1 (2										
1. (6	a) Name of Candidate (in full)									
	Gibbs Jensen, Tief, , ,		اامامانا			0.0000000	hala EEO Li	Alfination A	li imala a v	
(D	b) Address (number and street)					Candidate's FEC Identification Number H4CA02130				
(c	c) City, State, and ZIP Code					3. Is This		eW.	Amende	ed
	Novato		CA	94947	•	Statem	ent X (N) OR	(A)	
4. Pa	arty Affiliation	5. Office Sought			6. State & Dist		ate			
F	REPUBLICAN PARTY	House			CA	02				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7. 11	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)									
N	IOTE: This designation should be f	iled with the appro	priate office lis	sted in th	e instructions.					
(a	a) Name of Committee (in full)									
	Tief Gibbs Jensen 4	Congress 2	2024							
(b	b) Address (number and street) 2260 Center Rd.									
(c	c) City, State, and ZIP Code									
	Novato				CA	94947				
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										
Ca	andidacy.									
N	IOTE: This designation should be f	iled with the princip	oal campaign	committe	e.					
(a	a) Name of Committee (in full)									
/la	- \									
(b	b) Address (number and street)									
(b	b) Address (number and street)									
	b) Address (number and street) c) City, State, and ZIP Code									
										_
		mined this Statem	ent and to the	best of n	ny knowledge a	nd belief it is	true, correct	and compl	ete.	
(c	c) City, State, and ZIP Code	mined this Statemo	ent and to the	best of n	ny knowledge a	nd belief it is	true, correct	and compl	ete.	
(c	c) City, State, and ZIP Code I certify that I have exa	mined this Statem	ent and to the			Date		and compl	ete.	
(c	c) City, State, and ZIP Code I certify that I have exampted the conditions of Candidate	mined this Stateme	ent and to the		ny knowledge a ronically Filed]			and compl	ete.	
(c	c) City, State, and ZIP Code I certify that I have exampted the conditions of Candidate	mined this Statemo	ent and to the			Date		and compl	ete.	
Sign Gibb	c) City, State, and ZIP Code I certify that I have exampted the conditions of Candidate			[Electr	onically Filed]	Date 05/09/202	23			
Sign Gibb	c) City, State, and ZIP Code I certify that I have example of Candidate by Jensen, Tief, , ,			[Electr	onically Filed]	Date 05/09/202	23			
Sign Gibb	c) City, State, and ZIP Code I certify that I have example of Candidate by Jensen, Tief, , ,			[Electr	onically Filed]	Date 05/09/202	23			

FEC FORM 2 (REV. 02/2009)