

Image# 202308049596497186

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) GUNTER, JEFF, , DR,			2. Candidate's FEC Identification Number S4NV00304	
(b) Address (number and street) PO BOX 95546		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code LAS VEGAS		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	6. State & District of Candidate NV 00		

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) DR JEFF GUNTER FOR SENATE		
(b) Address (number and street) PO BOX 95546		
(c) City, State, and ZIP Code LAS VEGAS NV 89193		

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 GUNTER, JEFF, , DR,	Date 08/04/2023
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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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