

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Valerie-Lee Willis.		
(b) Address (number and street) 100 West Pearl Street, PO Box 241		<input checked="" type="checkbox"/> Check if address changed (CAMPAIGN)
(c) City, State, and ZIP Code Coldwater, Michigan 49036		2. FEC Candidate Identification Number C00675256
4. Party Affiliation Libertarian		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
5. Office Sought United States Senate		6. State & District of Candidate Michigan

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) Vote Willis for United States Senate Michigan Committee
(b) Address (number and street) PO Box 241
(c) City, State, and ZIP Code Coldwater, Michigan 49036

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) N/A
(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 Valerie-Lee Willis	Date 05-11-2024
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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NOT FOR PUBLIC RELEASE

DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

N/A

(b) Address (number and street)

N/A

(c) City, State, and ZIP Code

N/A

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N/A

(b) Address (number and street)

N/A

(c) City, State, and ZIP Code

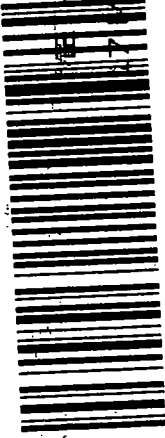
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COLDWATER MI

UNITED STATES

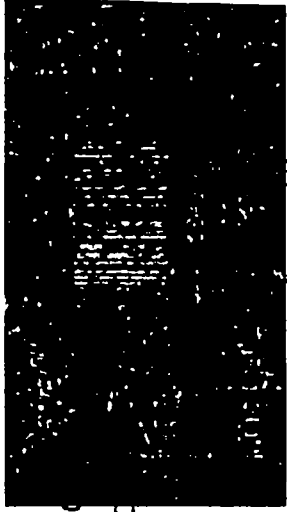


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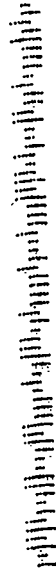
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	05/23/2024 DATE PREPARED

(4/2023)

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