

Image# 202104139443280262

FEC FORM 2

STATEMENT OF CANDIDACY

| | | |
|---|----------------------------|--|
| 1. (a) Name of Candidate (in full) GIBBONS, MICHAEL, , , | | 2. Candidate's FEC Identification Number S8OH00086 |
| (b) Address (number and street) 1650 E 55th St #603679 | | <input checked="" type="checkbox"/> Check if address changed |
| (c) City, State, and ZIP Code Cleveland OH 44103 | | 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 OH 00 |

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) GIBBONS FOR OHIO | | |
| (b) Address (number and street) PO BOX 93904 | | |
| (c) City, State, and ZIP Code CLEVELAND OH 44101 | | |

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 Gibbons, Michael, , , <i>[Electronically Filed]</i> | Date 04/13/2021 |
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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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