

FEC FORM 2

STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) ARTURO P. REYES		2024 MAY 15 AM 10:12
(b) Address (number and street) FRIENDS OF REYES FOR US SENATOR, 94-1432		2. FEC Candidate Identification Number NONE ASSIGNED
(c) City, State, and ZIP Code KAHULU ST, WAIPAHA HI 96797		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation REPUBLICAN	5. Office Sought U.S. SENATOR	6. State & District of Candidate HAWAII STATE

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) FRIENDS OF REYES (REYES for U.S. SENATOR, HAWAII)
(b) Address (number and street) 94-1432 KAHULU STREET
(c) City, State, and ZIP Code WAIPAHA HAWAII USA 96797

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) None
(b) Address (number and street) NA
(c) City, State, and ZIP Code NA

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 5/6/2024
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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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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

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

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

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

[illegible]

2024 MAY 15 AM 10:12


ALVIN P. REYES, for U.S. DEPT OF
FRIENDS of REYES
1-1432 154TH ST, WAPOAH WA 96797

FEDERAL Election Commission
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WASHINGTON DC 20463

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<input type="checkbox"/> Postmark Illegible		
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<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked	
 PREPARER	05-28-2024 DATE PREPARED	

(4/2023)