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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Knight, Mitchel, Ian, ,		
(b) Address (number and street) 2030 Virginia St		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Salem		OR 97301
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought House
6. State & District of Candidate OR 02		2. Candidate's FEC Identification Number H6OR02207
3. Is This Statement		<input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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 Mitchel Knight		
(b) Address (number and street) 2030 Virginia St		
(c) City, State, and ZIP Code Salem		
OR 97301		

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 Knight, Mitchel, , ,	Date 05/10/2025
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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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