FEC FORM 2 STATEMENT OF CANDIDACY

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| 1. | (a) Name of Candidate (in full) | | | | | | | | | | |
|--|--|----------------------------|----|--------|-----------------|---|----------|-------|--|--------------------|--|
| | Dightman, Douglas, , , | | | | | | | | | | |
| | (b) Address (number and street) 1540 E JENSEN ROAD | □ Check if address changed | | | | 2. Candidate's FEC Identification Number H8WA06100 | | | | | |
| | (c) City, State, and ZIP Code | | | | | 3. Is Thi | | New | | Amended | |
| | SHELTON | | W | A 9858 | 34 | Stater | ment 🗶 (| N) OR | | (A) | |
| 4. | Party Affiliation | 5. Office Sough | nt | | 6. State & Dist | | date | | | | |
| | REPUBLICAN PARTY | House | | | WA | 06 | | | | | |
| DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE | | | | | | | | | | | |
| 7. | I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) | | | | | | | | | | |
| | Dightman for Congress | | | | | | | | | | |
| | (b) Address (number and street) PO BOX 459 | | | | | | | | | | |
| | (c) City, State, and ZIP Code | | | | | | | | | | |
| | Shelton | | | | WA | 98584 | 4 | | | | |
| (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 (symplex and street) | | | | | | | | | | | |
| (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. | | | | | | | | | | | |
| Si | ignature of Candidate | | | | | Date | | | | | |
| Dightman, Douglas, , , [Electronic | | | | | | 05/25/20 |)18 | | | | |
| 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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| | | | | | | | | | | 2 (REV. 02/2009) | |
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