## FEC FORM 2 STATEMENT OF CANDIDACY

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1.	(a) Name of Candidate (in full)										
	Bergman, John, , ,										
	(b) Address (number and street) N3465 Sylvan Isle Drive	□ Check if address changed			2. Candidate's FEC Identification Number H6MI01226						
	(c) City, State, and ZIP Code					3. Is Thi	s I	New			mended
	Watersmeet		М	I 499	69	Stater	nent (	(N)	OR	<b>X</b> (	A)
4.	Party Affiliation	5. Office Soug	ght		6. State & Dist	trict of Candi	date				
	REPUBLICAN PARTY	House			MI	01					
	DE	ESIGNATIC	N OF PR				ITTEE				
7.	I hereby designate the following na	med political co	ommittee as n	ny Principa	Campaign Com	mittee for the	e <u>2024</u> (year of ele		election	(s).	
	NOTE: This designation should be	filed with the ap	opropriate offi	ce listed in	the instructions.						
	(a) Name of Committee (in full) BERGMANFORCONGRESS										
	(b) Address (number and street) N5070 CISCO LAKE ROAD										
	(c) City, State, and ZIP Code										
	WATERSMEET				МІ	49969	9				
8.	I hereby authorize the following nar candidacy. NOTE: This designation should be	ned committee	, which is NO	T my princi			eceive and e	expend	funds or	n beha	lf of my
	(a) Name of Committee (in full) THE BERGMAN VI			-							
	(b) Address (number and street)										
	824 S. MILLEDGE AVE										
	STE 101										
	(c) City, State, and ZIP Code										
	ATHENS				GA	30605	5				
-	I certify that I have exa	amined this Sta	tement and to	the best c	f my knowledge a	and belief it is	s true, correc	ct and c	omplete	Э.	
Si	ignature of Candidate					Date					
В	ergman, John, , ,			[Ele	ctronically Filed]	02/03/20	023				
N	OTE: Submission of false, erroneous	s, or incomplete	information n	nay subject	the person signi	ng this State	ment to pena	alties of	2 U.S.0	C. §437	7g.

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

## **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)			
BMW VICTORY COMMITTEE			
(b) Address (number and street) PO BOX 30844			
(c) City, State, and ZIP Code			
BETHESDA	MD	20824	

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.

(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)	
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(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