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FEC FORM 2

STATEMENT OF CANDIDACY

| 1. | (a) Name of Candidate (in full) | | | | | | | | _ | |
|---|--|----------------------------|--------------|-------------|-------------------|---|--------------|---------|---|--|
| | Millis, Tonya, Lynn, , | | | | | | | | | |
| | (b) Address (number and street) 1031 Sherwood Rd. | ☐ Check if address changed | | | | Candidate's FEC Identification Number H2IN09225 | | | | |
| | (c) City, State, and ZIP Code | | | | | | lew | Amended | t | |
| | Mitchell | | IN | 4744 | 6 | Statement (| N) OR | (A) | | |
| 4. | Party Affiliation | 5. Office Soug | ht | | | rict of Candidate | | | | |
| | LIBERTARIAN | House | | | IN | 09 | | | _ | |
| DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE | | | | | | | | | | |
| 7. | 7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election) | | | | | | | | | |
| | NOTE: This designation should be filed with the appropriate office listed in the instructions. | | | | | | | | | |
| | (a) Name of Committee (in full) | | | | | | | | | |
| Tonya Millis Campaign, Principal Committee | | | | | | | | | | |
| | (b) Address (number and street) P.O. Box 378 | | | | | | | | _ | |
| | (c) City, State, and ZIP Code | | | | | | | | _ | |
| | Mitchell | | | | IN | 47446 | | | | |
| 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 | | | | | | | | _ | |
| | (o) only, oracle, and 2.11 oode | | | | | | | | | |
| | · | mined this Stat | ement and to | the best of | my knowledge a | and belief it is true, correct | t and comple | te. | | |
| Si | gnature of Candidate | | | | | Date | | | | |
| M | illis, Tonya, Lynn, , | | | [Elec | tronically Filed] | 09/20/2021 | | | | |
| 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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FEC FORM 2 (REV. 02/2009)