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PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) GUEST, MICHAEL PATRICK, , ,			2. Candidate's FEC Identification Number H8MS03125	
(b) Address (number and street) POST OFFICE BOX 470		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code BRANDON MS 39043		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate MS 03		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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 MICHAEL GUEST		
(b) Address (number and street) POST OFFICE BOX 470		
(c) City, State, and ZIP Code BRANDON MS 39043		

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) GUEST PAC		
(b) Address (number and street) POST OFFICE BOX 80		
(c) City, State, and ZIP Code JACKSON MS 39205		

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 GUEST, MICHAEL PATRICK, , , [Electronically Filed]	Date 01/29/2019
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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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