FEC FORM 2 STATEMENT OF CANDIDACY

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1.	(a) Name of Candidate (in full) Tiffany, Tom, , ,						
	(b) Address (number and street) 11725 Shirley Glenn Ln	E Check if address changed				2. Candidate's FEC Identification Number H0WI07101	
	(c) City, State, and ZIP Code					3. Is This New Amended	
	Hazelhurst		WI	5453	1-9683	Statement (N) OR (A)	
4.	Party Affiliation	5. Office Sought				rict of Candidate	
	REPUBLICAN PARTY	House			WI	07	
	DE	SIGNATION	OF PRI	NCIPAL	CAMPAIG		
7.	 I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election(s). 						
	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
	(a) Name of Committee (in full)						
Tiffany for Wisconsin, Inc.							
	(b) Address (number and street)						
	PO Box 1007						
	(c) City, State, and ZIP Code						
	Wausau				WI	54402-1007	
8. 	 I hereby authorize the following nar candidacy. NOTE: This designation should be f (a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code 					nmittee, to receive and expend funds on behalf of my	
_	I certify that I have eva	mined this Statem	ent and to	the hest of	my knowledge a	and belief it is true, correct and complete.	
6:	gnature of Candidate				ing knowledge a	Date	
T	Tiffany, Tom, , ,					04/09/2024	
N	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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Form/Schedule: F2A Transaction ID :

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