PAGE 1 / 1

Image# 202106049448814394

FEC FORM 2

STATEMENT OF CANDIDACY

| 4 () N () () () () () () | | | | | | | | |
|--|-------------------------|-------------------|------------|------------------|---|----------------|--------------|-----------------|
| (a) Name of Candidate (in full) Addland, Frile | | | | | | | | |
| Aadland, Erik, , , |) □ Cha | al if address a | لممسمط | | O Condida | to'o FFO Ida | tification N | l |
| (b) Address (number and street) ☐ Check if address changed PO Box 624 | | | | | Candidate's FEC Identification Number S2C000175 | | | |
| (c) City, State, and ZIP Code | | | | | 3. Is This | | ew | Amended |
| Pine | | CO 80470 | | | | nent X (N | | (A) |
| 4. Party Affiliation | 5. Office Sought | | | 6. State & Dist | rict of Candid | date | | |
| REPUBLICAN PARTY | Senate | | | СО | 00 | | | |
| | DESIGNATION | OF PRING | CIPAL | CAMPAIGI | N COMMI | TTEE | | |
| 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 appr | opriate office li | sted in th | e instructions. | | | | |
| (a) Name of Committee (in full) | | | | | | | | |
| Aadland for Sena | ite | | | | | | | |
| (b) Address (number and street PO Box 624 | () | | | | | | | |
| 1 0 DOX 02 1 | | | | | | | | |
| (c) City, State, and ZIP Code | | | | | | | | |
| Pine | | | | CO | 80470 |) | | |
| | | | | | | | | |
| | DESIGNATION | OF OTHE | R AU1 | HORIZED | COMMIT | TEES | | |
| | | | _ | g Representativ | | | | |
| I hereby authorize the following candidacy. | named committee, w | hich is NOT m | y principa | al campaign cor | nmittee, to re | ceive and exp | oend funds | on behalf of my |
| NOTE: This designation should | be filed with the princ | ipal campaign | committe | ee. | | | | |
| (a) Name of Committee (in full) | | | | | | | | |
| () | | | | | | | | |
| | | | | | | | | |
| (b) Address (number and street | :) | | | | | | | |
| | | | | | | | | |
| (c) City, State, and ZIP Code | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| I certify that I have | examined this Stater | nent and to the | best of i | my knowledge a | and belief it is | true, correct | and comp | ete. |
| Signature of Candidate | | | | | Date | | | |
| Aadland, Eriik, , , [Electronically Filed] | | | | | 06/04/2021 | | | |
| | | | [Eleci | гонісшіў Гіней ј | | | | |
| | | | | | | | | |
| NOTE: Submission of false, errone | eous, or incomplete in | ormation may | subject tl | ne person signii | ng this Stater | ment to penalt | ties of 2 U. | S.C. §437g. |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

FEC FORM 2 (REV. 02/2009)