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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Vance, Michael, , ,		h a alc if!-!	aa aha::-:- !		2. Condidate a FFC Identification Number	
	(b) Address (number and street) 6902 W 54th Ave	ddress (number and street)				Candidate's FEC Identification Number H4CO05204	
	(c) City, State, and ZIP Code					3. Is This New Amended	
	Arvada		CC	8000		Statement X (N) OR (A)	
4.	Party Affiliation	5. Office Soug	ht			strict of Candidate	
	LIBERTARIAN	House			СО	05	
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE						
7.	I hereby designate the following nar	by designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election) E: This designation should be filed with the appropriate office listed in the instructions. The designation should be filed with the appropriate office listed in the instructions. The designation should be filed with the appropriate office listed in the instructions. The designation should be filed with the appropriate office listed in the instructions. The designation should be filed with the appropriate office listed in the instructions. The designation should be filed with the appropriate office listed in the instructions. The designation should be filed with the appropriate office listed in the instructions. The designation should be filed with the appropriate office listed in the instructions.					
	NOTE: This designation should be f	led with the ap	propriate offi	ce listed in t	ne instructions.		
	(a) Name of Committee (in full)						
	Committee To Elect Michael Vance						
	(b) Address (number and street)						
	6902 W 54th Ave						
	(c) City, State, and ZIP Code						
	Arvada				CO	80002	
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							
	I certify that I have exa	mined this Stat	ement and to	the best of	my knowledge a	and belief it is true, correct and complete.	
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 Date							
V	Vance, Michael, , ,					05/09/2024	
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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FEC FORM 2 (REV. 02/2009)