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PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) West, Kevin, , ,		
(b) Address (number and street) POBOX 1043		☐ Check if address changed
(c) City, State, and ZIP Code KLAMATH FALLS		OR 97603
4. Party Affiliation INDEPENDENT		5. Office Sought Presidential
6. State & District of Candidate 00		
2. Candidate's FEC Identification Number P80008980		
3. Is This Statement ☒ New (N) OR ☐ Amended (A)		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2028 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) Rebel Alliance		
(b) Address (number and street) POBOX 1043		
(c) City, State, and ZIP Code KLAMATH FALLS		
OR 97601		

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		

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 West, Kevin, , ,	Date 02/13/2026
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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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