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## FEC FORM 2

## STATEMENT OF CANDIDACY

	(a) Name of Candidate (in full)											
	Province, Danny, Paul, Mr.,											
	(b) Address (number and street) 901 East Gay Street Apt 3	□Ch	Candidate's FEC Identification Number     H6MO04257									
	(c) City, State, and ZIP Code Warrensburg		3. Is This Statem		New (N)	OR		Amended (A)				
4.	Party Affiliation DEMOCRATIC PARTY	5. Office Sough House	t		6. State & Dis	trict of Candid	date					
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election)											
	NOTE: This designation should be filed with the appropriate office listed in the instructions.											
	(a) Name of Committee (in full)											
	Province4Congress											
	(b) Address (number and street)											
	901 E Gay Street Apt 3											
	(c) City, State, and ZIP Code											
	Warrensburg				MO	64093	3					
(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)												
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	(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code											
	(b) Address (number and street)											
	(b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of the state of	nmined this State	ment and to	the best of l	my knowledge a		true, corre	ect and (	comple	ete.		
Sig	(b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate	nmined this State	ment and to	the best of I	my knowledge a	Date		ect and (	comple	ete.		
Sig	(b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of the state of	nmined this State	ment and to	the best of I	my knowledge a			ect and o	compli	ete.		
Się Pr	(b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate					<b>Date</b> 10/08/20	25				137g.	

FEC FORM 2 (REV. 02/2009)