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FEC FORM 2

STATEMENT OF CANDIDACY

_											
1.	(a) Name of Candidate (in full) Maher, Michael, A, ,										
	(b) Address (number and street) PO Box 490	☐ Check if address changed				Candidate's FEC Identification Number H2CA22215					
	(c) City, State, and ZIP Code					3. Is This	Ne	W		Amended	
	Kingsburg	CA 93631				Stateme	()	OR		< (A)	
4.	Party Affiliation REPUBLICAN PARTY	5. Office Soug			6. State & Dis	trict of Candida 21	ate				
	National Property of the Control of										
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)										
Maher for Congress											
(b) Address (number and street)											
	PO Box 490										
	(c) City, State, and ZIP Code										
	Kingsburg				CA	93631					
DESIGNATION OF OTHER AUTHORIZED COMMITTEES											
(Including Joint Fundraising Representatives)											
8.	I hereby authorize the following nar candidacy.	ned committee	, which is NO	Γ my principa	al campaign co	mmittee, to rec	eive and exp	end fund	s on b	ehalf of my	
	NOTE: This designation should be filed with the principal campaign committee.										
(a) Name of Committee (in full)											
Integrity Tour 2024											
(b) Address (number and street)											
	9460 Tegner Road										
	(c) City, State, and ZIP Code										
	Hilmar				CA	95324					
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											
Maher, Michael, A, ,							04/26/2024				
171	uner, michaet, A, ,					04/20/202	7				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											

FEC FORM 2 (REV. 02/2009)