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FEC FORM 2

STATEMENT OF CANDIDACY

	e of Candidate (in full)									
	erson, Kaylee, Jade, ,									
	(b) Address (number and street) ☐ Check if address changed 5555 W Homer Rd					Candidate's FEC Identification Number H4ID01131				
(c) City,	State, and ZIP Code					3. Is This		ew	Amended	
Eag	gle		ID 83616			Staten	nent X (N	l) OR	(A)	
4. Party Af	filiation	5. Office Soug	ht		6. State & Dist	trict of Candid	date			
DEMO	CRATIC PARTY	House			ID	01				
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) KAYLEE FOR CONGRESS										
	ess (number and street) BOX 302									
(c) City,	State, and ZIP Code									
EA	AGLE				ID	83616	6			
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)										
(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						Date				
Peterson, Kaylee, Jade, ,				[Electronically Filed]			04/16/2023			
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)