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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) McAlmond, Russell, , 5035244864,		
(b) Address (number and street) 678 Pleasantville Way		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Grants Pass		OR      97526
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House
		6. State & District of Candidate OR      02

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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)

McAlmond for Congress Committee

(b) Address (number and street)

678 Pleasantville Way

(c) City, State, and ZIP Code

Grants Pass

OR      97526

### 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 McAlmond, Russell, ,	Date 10/17/2025
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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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