

Image# 202604169863148553

FEC FORM 2

STATEMENT OF CANDIDACY

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| 1. (a) Name of Candidate (in full) Bahry, Michael, , , | | 2. Candidate's FEC Identification Number S6RI00288 |
| (b) Address (number and street) <input type="checkbox"/> Check if address changed 26 Nye Street | | 3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A) |
| (c) City, State, and ZIP Code East Providence RI 02914 | | |
| 4. Party Affiliation INDEPENDENT | 5. Office Sought Senate | 6. State & District of Candidate RI 00 |

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) Michael Bahry for Senate Committee | |
| (b) Address (number and street) 26 Nye Street | |
| (c) City, State, and ZIP Code East Providence RI 02914 | |

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.

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|---------------------------------|
| (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.

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|---|--------------------|
| Signature of Candidate Bahry, Michael, , , | Date 04/16/2026 |
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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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