Image# 202312109599435567 PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

	(a) Name of Candidate (in full)										
	Lam, Adriel, , ,										
	(b) Address (number and street)		heck if addre	se changed		2 Candida	te's FEC Ident	ification N	lumber		
	PO Box 4682		neck ii addre	Candidate's FEC Identification Number S4HI00177							
	(c) City, State, and ZIP Code					3. Is This	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Amen	ided	
	Kaneohe		Н	I 9674	4	Statem	nent X (N)	OR	(A)		
4.	Party Affiliation	5. Office Soug	ght		6. State & Dist		late				
	REPUBLICAN PARTY	Senate			HI	00					
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)										
	LAM4ALOHA										
	(b) Address (number and street)										
	P.O. BOX 4682										
	(c) City, State, and ZIP Code										
	Kaneohe				HI	96744					
	DE	SIGNATIO	N OF OT	HER AU	THORIZED	COMMIT	TEES				
		(Including Joir	nt Fundraisir	ng Representativ	/es)					
_											
8.	I hereby authorize the following nan candidacy.	ned committee	, which is NO	i my princip	ai campaign cor	mmittee, to re	ceive and expe	ena tunas	on benait of i	my	
				ian commit							
	NOTE: This designation should be f	iled with the pr	ıncıpaı campa	aign commit	ee.						
		iled with the pr	incipai campa	aigh commi	ee.						
	NOTE: This designation should be f (a) Name of Committee (in full)	iled with the pr	incipai campa	aigh cominic	ee.						
		iled with the pr	Inсіраі сатра	aigir commit	ee.						
		iled with the pr	іпсіраі сатра	aigh commi	ee.						
	(a) Name of Committee (in full)	iled with the pr	іпсіраі сатра	agn commu	ee.						
	(a) Name of Committee (in full)	iled with the pr	іпсіраі сатра	agn commu	ee.						
	(a) Name of Committee (in full)	iled with the pr	іпсіраі сатра	agri commu	ee.						
	(a) Name of Committee (in full) (b) Address (number and street)	iled with the pr	іпсіраі сатра	agri commu	ee.						
	(a) Name of Committee (in full) (b) Address (number and street)	iled with the pr	іпсіраі сатра	agri commu	ee.						
	(a) Name of Committee (in full) (b) Address (number and street)					and belief it is	true, correct a	nd compl	lete.		
Sig	(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code					and belief it is	true, correct a	nd compl	ete.		
	(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code I certify that I have example to the control of the control					Date		nd compl	'ete.		
	(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code							nd compl	ete.		
	(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code I certify that I have example to the control of the control					Date		nd compl	lete.		
L	(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code I certify that I have example to the control of the control	mined this Sta	tement and to	o the best of	my knowledge a	Date 12/10/202	23				
Lo	(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code I certify that I have examing the state of Candidate am, Adriel, , ,	mined this Sta	tement and to	o the best of	my knowledge a	Date 12/10/202	23				
Lo	(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code I certify that I have examing the state of Candidate am, Adriel, , ,	mined this Sta	tement and to	o the best of	my knowledge a	Date 12/10/202	23				

FEC FORM 2 (REV. 02/2009)