

Image# 202308079596497570

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Boles, Denyc, , ,		2. Candidate's FEC Identification Number H4OR06013
(b) Address (number and street) 3935 Kalakala Cir S		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Salem OR 97306		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate OR 06

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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) Boles for Oregon	
(b) Address (number and street) 4742 Liberty Rd. S, #383	
(c) City, State, and ZIP Code Salem OR 97302	

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 Boles, Denyc, , ,	Date 08/07/2023
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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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