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## FEC FORM 2

## STATEMENT OF CANDIDACY

_							=	
1.	(a) Name of Candidate (in full)							
	Issa, Allen, , ,							
	(b) Address (number and street) 526 N St Cloud St #717	□ Che	ck if address	changed		Candidate's FEC Identification Number     H4PA07126		
	(c) City, State, and ZIP Code					3. Is This New Amended	_	
	Allentown		PA	1810	4	Statement X (N) OR (A)		
4.	Party Affiliation	5. Office Sought			6. State & Dist	rict of Candidate	_	
	REPUBLICAN PARTY	House			PA	07		
	DE	SIGNATION	OF PRIN	ICIPAL	CAMPAIGN	N COMMITTEE	_	
7.	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)						_	
	Allen Issa for Congre	ess						
	(b) Address (number and street)						_	
	526 N St Cloud St							
	#717							
	(c) City, State, and ZIP Code						_	
	Allentown				PA	18104		
8.		(Inc	luding Joint I	Fundraisin	g Representativ	COMMITTEES es) nmittee, to receive and expend funds on behalf of my		
	candidacy.	9 1 20 0	. , .	•••				
	<b>NOTE:</b> This designation should be f	iled with the princ	ipal campaig	n committe	ee.			
	(a) Name of Committee (in full)						_	
	(b) Address (number and street)							
_	(c) City, State, and ZIP Code						_	
	(o) Oity, Otato, and Zii Codo							
							_	
	I certify that I have exa	mined this Staten	nent and to th	ne best of i	my knowledge a	and belief it is true, correct and complete.		
Signature of Candidate					Date	-		
Issa Allen								
Is						09/15/2023		
Is	gnature of Candidate					09/15/2023		
Is						09/15/2023	_	
_	ssa, Allen, , ,	or incomplete inf	ormation ma	y subject tl	he person signir	09/15/2023  ng this Statement to penalties of 2 U.S.C. §437g.	_	
_	ssa, Allen, , ,	or incomplete inf	ormation ma	y subject tl	he person signir		<u>-</u>	
_	ssa, Allen, , ,	or incomplete inf	ormation ma	y subject tl	he person signir		<b>-</b>	

FEC FORM 2 (REV. 02/2009)