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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)					
	SOBOLESKI, MIKE, , , (b) Address (number and street)	₽Ch	ock if addro	ee changed		2. Candidate's FEC Identification Number
	PO BOX 603					H4ME02283
	(c) City, State, and ZIP Code					3. Is This New Amended
	AUGUSTA		ME	0433		Statement (N) OR (A)
4.	Party Affiliation	5. Office Sough	t		6. State & Dis	trict of Candidate 02
	REPUBLICAN PARTY	House			IVIE	02
DESIGNATION OF PRINCIPAL CAMPAIGN 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)					
MIKE SOBOLESKI FOR CONGRESS INC						
	(b) Address (number and street)					
	PO BOX 603					
	(c) City, State, and ZIP Code					
	AUGUSTA				ME	04332
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.						
Si	Signature of Candidate					Date
S	SOBOLESKI, MIKE, , ,					09/27/2023
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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FEC FORM 2 (REV. 02/2009)