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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full) STEIN, DAVID, , ,						
	(b) Address (number and street) 902 MAPLE STREET	☐ Check if address changed				Candidate's FEC Identification Number S4MI00702	
	(c) City, State, and ZIP Code ESSEXVILLE		MI	48732	2	3. Is This Statement X (N) OR (A)	
4.	Party Affiliation UST	5. Office Soug Senate	ht		6. State & Dis	trict of Candidate 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)						
COMMITTEE TO ELECT DAVE STEIN							
	(b) Address (number and street)						
	902 MAPLE STREET						
	(c) City, State, and ZIP Code						
	ESSEXVILLE				MI	48732	
 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					Date		
S	TEIN, DAVID, , ,		07/22/2024				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.							

FEC FORM 2 (REV. 02/2009)