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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Cheader, Robert, , ,		
(b) Address (number and street) 404 Lincoln Avenue		☐ Check if address changed
(c) City, State, and ZIP Code Salinas CA 93901		2. Candidate's FEC Identification Number P80006497
4. Party Affiliation REPUBLICAN PARTY		3. Is This Statement ☒ New (N) OR ☐ Amended (A)
5. Office Sought Presidential		6. State & District of Candidate CA 00

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2028 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) Committee to elect Robert Cheader		
(b) Address (number and street) 404 Lincoln Avenue		
(c) City, State, and ZIP Code Salinas CA 93901		

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 Cheader, Robert, Neil, Mr, jr	Date 08/22/2023
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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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