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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Whitley, Gabriel, Mathew, ,							
	(b) Address (number and street) 912 Fairlawn Circle West	X Che	eck if addres	ss changed		2. Candidate's FEC Idea H2IN08151	ntification Number	
	(c) City, State, and ZIP Code						ew Amen	ded
_	Indianapolis		IN	4620		Statement (N) OR (A)	
4.	Party Affiliation	5. Office Sought				rict of Candidate		
	REPUBLICAN PARTY	House			IN	07		
	DE	SIGNATION	OF PRI	NCIPAL	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 f	iled with the appr	opriate offic	e listed in t	he instructions.			
	(a) Name of Committee (in full) HONEST GABE FO	R CONGR	ESS					
	(b) Address (number and street) 1033 N DEARBORN ST							
	(c) City, State, and ZIP Code							
	INDIANAPOLIS				IN	46201		
Q	DE I hereby authorize the following name	(Inc	cluding Join	t Fundraisir	g Representative	,	nand funds as babalf of s	21/
ο.	candidacy.	ied committee, w	THICH IS INO I	тту рттісір	aı campaign com	minutee, to receive and ex	pena ianas on benan of n	ıy
	NOTE: This designation should be f	iled with the princ	cipal campa	ign committ	ee.			
	(a) Name of Committee (in full)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
	I certify that I have exa	mined this Stater	ment and to	the best of	my knowledge a	and belief it is true, correct	and complete.	
	gnature of Candidate					Date		
W	hitley, Gabriel, M, ,			[Elec	tronically Filed]	07/20/2023		
N	OTE: Submission of false, erroneous,	or incomplete in	formation m	ay subject	he person signin	ng this Statement to penal	ties of 2 U.S.C. §437g.	
N	OTE: Submission of false, erroneous,	or incomplete in	formation m	ay subject	he person signin	ng this Statement to penal	ties of 2 U.S.C. §437g.	

FEC FORM 2 (REV. 02/2009)