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PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Hill, Aaron, , Dr.,		
(b) Address (number and street) 8191 California Pine Street		☐ Check if address changed
(c) City, State, and ZIP Code Las Vegas NV 89166		2. Candidate's FEC Identification Number H6NV04129
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House
6. State & District of Candidate NV 04		3. Is This Statement ☒ New (N) OR ☐ Amended (A)

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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) AARON HILL FOR NEVADA		
(b) Address (number and street) 8191 CALIFORNIA PINE ST		
(c) City, State, and ZIP Code LAS VEGAS NV 89166		

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 Hill, Aaron, , Dr.,	Date 04/15/2025
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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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