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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	GONZALES, MANUEL "MANI										
	(b) Address (number and street) ☐ Check if address changed 2105 VISTA OESTE NW STE E #3516					Candidate's FEC Identification Number S4NM00175					
	(c) City, State, and ZIP Code					3. Is This	New	1		Amended	
	ALBUQUERQUE		NM	87120	0	Statemen	nt X (N)	OR	ш	(A)	
4.	Party Affiliation	5. Office Sought			6. State & Dist	rict of Candidate	е				
	REPUBLICAN PARTY	Senate			NM	00					
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)										
MANNY GONZALES FOR SENATE											
	(b) Address (number and street)										
	2105 VISTA OESTE NW STE E #3516										
	(c) City, State, and ZIP Code										
	ALBUQUERQUE				NM	87120					
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)											
8.	I hereby authorize the following nar candidacy.	ned committee, whic	h is NOT m	y principa	al campaign con	nmittee, to rece	ive and expe	nd funds	on beha	alf of my	
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										
	(c) City, State, and ZIP Code										
_											
	I certify that I have exa	amined this Statemer	nt and to the	e best of i	my knowledge a	and belief it is tru	ue, correct ar	nd compl	ete.		
Si	Signature of Candidate						Date				
GONZALES, MANUEL "MANNY", , , III						01/10/2024					
U	ONZALES, MANUEL MANNI,,,I	ıı				01/10/2024					
N	OTE: Submission of false, erroneous	, or incomplete infor	mation may	subject tl	he person signir	ng this Stateme	nt to penaltie	s of 2 U.	S.C. §43	7g.	
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FEC FORM 2 (REV. 02/2009)