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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Dickinson, Michael, Robert, Dr.,			2. Candidate's FEC Identification Number H2VA04128	
(b) Address (number and street) 3717 Patterson Ave			☐ Check if address changed	
(c) City, State, and ZIP Code Richmond VA 23221			3. Is This Statement ☐ New (N) OR ☒ Amended (A)	
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate VA 04		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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) VOTE DICKINSON FOR THE TRUTH		
(b) Address (number and street) 3717 PATTERSON AVE		
(c) City, State, and ZIP Code RICHMOND VA 23221		

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 Dickinson, Michael, Robert, Dr., [Electronically Filed]	Date 09/02/2021
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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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