FEC FORM 2 STATEMENT OF CANDIDACY

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1.	(a) Name of Candidate (in full)						
	Herrell, Stella Yvette, , , (b) Address (number and street)	□ Che	eck if address	changed		2. Candidate's FEC Ider	ntification Number
	PO Box 404			onangoa		H8NM02156	
	(c) City, State, and ZIP Code			0000	7.0404	3. Is This Statement X (N	
	La Luz Party Affiliation	5. Office Sought	NM	8833	7-0404	Statement X (N trict of Candidate) OR (A)
4.	REPUBLICAN PARTY	House			NM	02	
	DE	SIGNATION		ICIPAL	CAMPAIG		
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election(s).						
	NOTE: This designation should be f	iled with the appr	opriate office	listed in th	ne instructions.		
	(a) Name of Committee (in full)						
	YVETTE4CONGRE	SS					
	(b) Address (number and street)						
	PO Box 404						
	(c) City, State, and ZIP Code						
	La Luz				NM	88337-0404	
 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) 2A Defense Fund 							
	(b) Address (number and street)						
	824 S Milledge Ave						
	Ste 101						
	(c) City, State, and ZIP Code Athens				GA	30605	
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 Date							
H	lerrell, Stella Yvette, , ,					05/14/2024	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.							
							FEC FORM 2 (REV. 02/2009)

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F2N Transaction ID :

Form/Schedule: Transaction ID: FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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)					
Emmer Majority Builders					
(b) Address (number and street)					
824 S. Milledge Ave. Ste. 101					
(c) City, State, and ZIP Code					
Athens	GA	30606			

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)					
Scalise Leadership Fund 2024					
(b) Address (number and street)					
320 1st St SE					
(c) City, State, and ZIP Code					
Washington	DC	20003-1838			

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)				
Grow The Majority				
(b) Address (number and street) 228 S Washington St				
Ste 115 (c) City, State, and ZIP Code				
Alexandria	VA	22314-5404		

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