

FEC FORM 2  
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) ALFORD, MARK, , ,		
(b) Address (number and street) PO BOX 1428		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code RAYMORE MO 64083		2. Candidate's FEC Identification Number H2MO04207
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House
6. State & District of Candidate MO 04		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> 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) MARK ALFORD FOR CONGRESS, INC.		
(b) Address (number and street) PO BOX 1428		
(c) City, State, and ZIP Code RAYMORE MO 64083		

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) MISSOURI TRUTH PAC		
(b) Address (number and street) 555 METRO PLACE N SUITE 525		
(c) City, State, and ZIP Code DUBLIN OH 43017		

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 ALFORD, MARK, , ,	Date 11/13/2024
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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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Optional Supplemental Page for Designation  
of Additional Authorized CommitteesPage 2 of 2

FEC Form 2S (Revised 02/2017)

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(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

FRESHMAN AGRICULTURAL REPUBLICAN MEMBERS TRUST AKA FARM TRUST

(b) Address (number and street)

PO BOX 30844

(c) City, State, and ZIP Code

BETHESDA

MD

20824

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