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FEC FORM 2

STATEMENT OF CANDIDACY

							=	
1.	(a) Name of Candidate (in full)							
	Hebron, Mike, , ,	Поь. I "		ahar!		2 Condidate a FFO Identification Number	_	
	(b) Address (number and street) P O BOX 15064	☐ Check if address changed				Candidate's FEC Identification Number H4MO01175		
	(c) City, State, and ZIP Code					3. Is This New Amended		
	St. Louis		МО	63110		Statement X (N) OR (A)		
4.	Party Affiliation	5. Office Sought				trict of Candidate		
	REPUBLICAN PARTY	House			MO	01		
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)							
Hebron For Congress - Election Committee								
	(b) Address (number and street)						_	
	P O BOX 15064							
	(c) City, State, and ZIP Code						_	
	St. Louis				MO	63110		
	DE	SIGNATION OF	ОТН	FR AII	THORIZED	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)								
	(b) Address (number and street)						_	
	,							
_	(c) City, State, and ZIP Code						_	
							_	
		mined this Statement	ana to tr	ne best of i	my knowleage a	and belief it is true, correct and complete.	_	
Signature of Candidate					Date	•		
Н	Hebron, Mike, , ,					06/10/2024		
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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FEC FORM 2 (REV. 02/2009)