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## FEC FORM 2

## STATEMENT OF CANDIDACY

(a) Name of Candidate (in full)  Fator Rop						
Estes, Ron, , ,  (b) Address (number and street)	Obsalcit - d	droop obsers	1	2 Candidatala FEO Idaia	tification Number	
12224 E Bracken Ct	eet)			Candidate's FEC Identification Number     H8KS04112		
(c) City, State, and ZIP Code				3. Is This Ne	<b>V</b>	
Wichita		KS 672	06-4126	Statement (N)	OR × (A)	
4. Party Affiliation	5. Office Sought			rict of Candidate		
REPUBLICAN PARTY	House		KS	04		
DE	SIGNATION OF P	RINCIPAL	. CAMPAIGN	N COMMITTEE		
7. I hereby designate the following nan	ned political committee as	s my Principal	Campaign Comn	nittee for the 2026 (year of elect	election(s). ion)	
NOTE: This designation should be fi	led with the appropriate of	office listed in	the instructions.			
(a) Name of Committee (in full)						
Ron Estes For Cong	ress					
(b) Address (number and street)						
PO Box 782952						
(c) City, State, and ZIP Code						
Wichita			KS	67278-2952		
<ol> <li>I hereby authorize the following name candidacy.</li> <li>NOTE: This designation should be fit</li> </ol>			, -	nmittee, to receive and exp	end funds on behalf of my	
(a) Name of Committee (in full)						
Team Estes						
(b) Address (number and street)						
PO Box 30844						
(c) City, State, and ZIP Code						
Bethesda			MD	20824		
l certify that I have exa	mined this Statement and	d to the best o	my knowledge a	and belief it is true, correct a	and complete.	
Signature of Candidate				Date		
Estes, Ron, , ,				11/26/2024		
Lstes, Rott, , ,				11/20/2024		
NOTE: Submission of false, erroneous,	or incomplete information	n mav subject	the person signin	ng this Statement to penalti		
	or incomplete information	ay cabjeet	the person signif	ig this otatement to penalti	es of 2 U.S.C. §437g.	
	of incomplete information		the person signif	ig this otatement to penalti	es of 2 U.S.C. §437g.	
	of incomplete information	ay cazject	the person signif	ng this otatement to penant	es of 2 U.S.C. §437g.	

FEC FORM 2 (REV. 02/2009)