

Image# 202412059738020865

PAGE 1 / 2

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Tiffany, Tom, , ,		
(b) Address (number and street) 11725 Shirley Glenn Ln		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Hazelhurst WI 54531-9683		2. Candidate's FEC Identification Number H0WI07101
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House
6. State & District of Candidate WI 07		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) Tiffany for Wisconsin, Inc.		
(b) Address (number and street) PO Box 1007		
(c) City, State, and ZIP Code Wausau WI 54402-1007		

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 Tiffany, Tom, , ,	Date 12/05/2024
---	--------------------

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: F2A
Transaction ID :

Form/Schedule:
Transaction ID: