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FEC FORM 2

STATEMENT OF CANDIDACY

	Name of Candidate (in full)					
	Tiffany, Shawn, , ,					
(b)	Address (number and street) 220 W Main	:) ☐ Check if address changed		Candidate's FEC Identification Number H4KS02172		
(c)	City, State, and ZIP Code				3. Is This Ne	
	Council Grove	KS	6684	-	Statement X (N)) OR (A)
_	rty Affiliation	5. Office Sought			rict of Candidate	
R	ep	House		KS	02	
	DE	SIGNATION OF PR	INCIPAL	CAMPAIG	COMMITTEE	
7. Ih	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)					
NC	OTE: This designation should be f	iled with the appropriate office	ce listed in th	ne instructions.		
(a)	Name of Committee (in full)					
	Shawn Tiffany for Co	ongress				
(b)	Address (number and street)					
	220 W. Main					
(c)	City, State, and ZIP Code					
	Council Grove			KS	66846	
	DE	SIGNATION OF OT	HER AU	THORIZED	COMMITTEES	
		(Including Join	ıt Fundraisin	g Representativ		
	ereby authorize the following nam	, -			es)	pend funds on behalf of my
ca	•	ned committee, which is NO	Γ my principa	al campaign coi	es)	pend funds on behalf of my
ca NC	ndidacy. TE: This designation should be f	ned committee, which is NO	Γ my principa	al campaign coi	es)	pend funds on behalf of my
ca NC	ndidacy.	ned committee, which is NO	Γ my principa	al campaign coi	es)	pend funds on behalf of my
Ca NC (a)	ndidacy. DTE: This designation should be f Name of Committee (in full)	ned committee, which is NO	Γ my principa	al campaign coi	es)	pend funds on behalf of my
(a)	ndidacy. TE: This designation should be f	ned committee, which is NO	Γ my principa	al campaign coi	es)	pend funds on behalf of my
Ca NC (a)	ndidacy. DTE: This designation should be f Name of Committee (in full)	ned committee, which is NO	Γ my principa	al campaign coi	es)	pend funds on behalf of my
(a)	ndidacy. DTE: This designation should be f Name of Committee (in full) Address (number and street)	ned committee, which is NO	Γ my principa	al campaign coi	es)	pend funds on behalf of my
(a)	ndidacy. DTE: This designation should be f Name of Committee (in full)	ned committee, which is NO	Γ my principa	al campaign coi	es)	pend funds on behalf of my
(a)	ndidacy. DTE: This designation should be f Name of Committee (in full) Address (number and street)	ned committee, which is NO	Γ my principa	al campaign coi	es)	pend funds on behalf of my
(a)	ndidacy. OTE: This designation should be for the property of	ned committee, which is NO	Γ my principa	ee.	es) nmittee, to receive and exp	
(a) (b) (c)	ndidacy. OTE: This designation should be formula in the property of the prope	ned committee, which is NO	Γ my principa	ee.	nmittee, to receive and exp	
(a) (b) (c)	ndidacy. OTE: This designation should be formula in the property of the prope	ned committee, which is NO	Γ my principa	ee.	nmittee, to receive and expand the structure of the struc	
(a) (b) (c)	ndidacy. OTE: This designation should be formula in the property of the prope	ned committee, which is NO	Γ my principa	ee.	nmittee, to receive and exp	
(a) (b) (c)	ndidacy. OTE: This designation should be formula in the property of the prope	ned committee, which is NO	Γ my principa	ee.	nmittee, to receive and expand the structure of the struc	
(a) (b) (c) Signa	ndidacy. OTE: This designation should be formula in the property of the prope	ned committee, which is NO	T my principal	al campaign cou	nmittee, to receive and expand belief it is true, correct to Date 04/26/2024	and complete.
(a) (b) (c) Signa	ndidacy. OTE: This designation should be formula in the property of the prope	ned committee, which is NO	T my principal	al campaign cou	nmittee, to receive and expand belief it is true, correct to Date 04/26/2024	and complete.

FEC FORM 2 (REV. 02/2009)