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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) MIKE SCHAEFER		
(b) Address (number and street) <input type="checkbox"/> Check if address changed 1050 E. Flamingo Rd. S107-1545		2. FEC Candidate Identification Number
(c) City, State, and ZIP Code Las Vegas, NV 89119		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation Democrat	5. Office Sought U S Senate	6. State & District of Candidate Nevada 2

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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) SCHAEFER FOR US SENATE NV2024
(b) Address (number and street) 1050 E Flamingo Rd. S107-1545
(c) City, State, and ZIP Code Las Vegas, Nv. 89119

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.

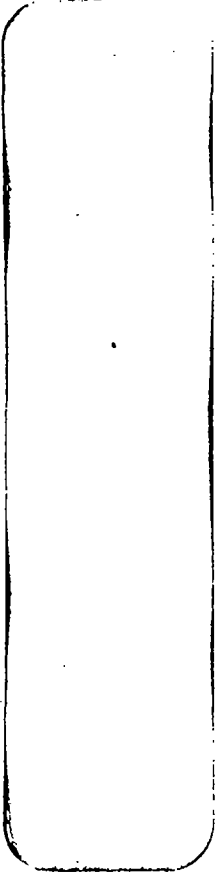
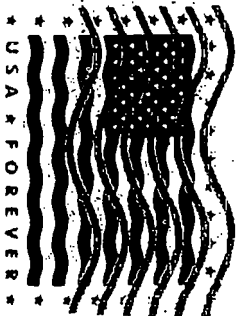
Signature of Candidate	Date
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

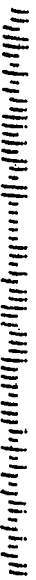
Mike Schaefer, Member Co. Board of Equalization
(NOT AT TAXPAYER EXPENSE)
849 Coast Blvd CL303
La Jolla CA 92037

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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<input checked="" type="checkbox"/> USPS First Class Mail	Date of Receipt <i>2/6/24</i>
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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date Date of Receipt Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received via FAX	Date of Receipt
<input type="checkbox"/> Received via Email	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	<i>2/6/24</i> DATE PREPARED

(4/2023)

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