FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 1

1. (a) Name of Candidate (in full)						
Barlow, William, Edward, Mr.,						
(b) Address (number and street) PO Box 812	Check if address changed			2. Candidate's FEC Identification Number S2OR00127		
(c) City, State, and ZIP Code	City, State, and ZIP Code				New	Amended
McMinnville	OR 97128			Statement	(N) OR X	(A)
4. Party Affiliation	5. Office Sought		6. State & Distr	ict of Candidate		
DEMOCRATIC PARTY	Senate		OR	00		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE						
7. I hereby designate the following nat	ned political committee as m	ny Principal (Campaign Comm		B election(s).	
NOTE: This designation should be	iled with the appropriate office	ce listed in tl	ne instructions.			
(a) Name of Committee (in full) WILL B. FRIENDS						
(b) Address (number and street) POST OFFICE BOX 812						
(c) City, State, and ZIP Code						
MCMINNVILLE			OR	97128		
WEWINNVILLE			ÖN	01120		
 8. I hereby authorize the following nan candidacy. NOTE: This designation should be formation and the following of Committee (in full) 				imittee, to receive an	d expend funds on be	half of my
(b) Address (number and street)						
(c) City, State, and ZIP Code						
I certify that I have exa	mined this Statement and to	the best of	my knowledge al	nd belief it is true, coi	rrect and complete.	
Signature of Candidate				Date		
Barlow, William, Edward, Mr., III		[Elect	tronically Filed]	07/03/2023		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.						
					FEC FORM	2 (REV. 02/2009)