

Image# 202002249203317947

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# FEC FORM 2

## STATEMENT OF CANDIDACY

|   |  |  |  |
|---|--|--|--|
| 1. (a) Name of Candidate (in full)<br>SHAMLEY, DOYEL, , , |  | 2. Candidate's FEC Identification Number<br>H0AZ01424  |  |
| (b) Address (number and street)<br>236 S BROWN ST         |  | 3. Is This<br>Statement <input checked="" type="checkbox"/> New<br>(N) <input type="checkbox"/> OR <input type="checkbox"/> Amended<br>(A) |  |
| (c) City, State, and ZIP Code<br>EAGAR AS 85925           |  | 4. Party Affiliation<br>REPUBLICAN PARTY   |  |
| 5. Office Sought<br>House                                 |  | 6. State & District of Candidate<br>AZ 01  |  |

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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)

**DOYEL SHAMLEY FOR CONGRESS**

(b) Address (number and street)  
9458 TREELAKE RD

(c) City, State, and ZIP Code

GRANITE BAY CA 95746

### 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**

SHAMLEY, DOYEL, , ,

**Date**

*[Electronically Filed]* 02/24/2020

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

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