Image# 202202039491566952 PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full	1)								
	CARRA, STEPHEN, , , (b) Address (number and stre	at\	Na ale if a dalua			O Condida	tala FFO Is	dantification	Niconala a u	
	225 HEATHER LANE #9	et) 🗆 C	☐ Check if address changed			Candidate's FEC Identification Number H2MI06117				
	(c) City, State, and ZIP Code					3. Is This		New	Amended	
	THREE RIVERS		M	4909		Staten		(N) OR	(A)	
4.	Party Affiliation	5. Office Sou			6. State & Dist		date			
	REPUBLICAN PARTY	House			MI	04				
		DESIGNATIO	N OF PR	INCIPAL	CAMPAIGI	N COMMI	TTEE			
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the election(s). (year of election)									
	NOTE: This designation shou		opropriate offi	ce listed in t	he instructions.					
	(a) Name of Committee (in ful STEVE CARRA	,	RESS							
	0.212 0.440									
	(b) Address (number and stre 225 HEATHER LANE #	,								
	(c) City, State, and ZIP Code									
	THREE RIVERS				MI	49093	3			
		DECIONATIO	N OF OT	LIED ALI	TUODIZED	COMMIT	TEEC			
		DESIGNATIO			I HORIZED ig Representativ		IEE5			
0	I haraby a sharing the fallowin		which is NO	T may a main aim			المجمع مرامع		a an hahalf of my	
ο.	I hereby authorize the following candidacy.	ig named committee	, WHICH IS NO	т туртпар	ai campaign coi	mmillee, to re	ceive and	ехрена типа	s on benail of my	
	NOTE: This designation shou	ld be filed with the pr	incipal campa	aign committ	ee.					
	(a) Name of Committee (in ful	II)								
	(b) Address (number and stre	et)								
	(-) Oit : Otata and ZID Oada									
	(c) City, State, and ZIP Code									
	I certify that I ha	ve examined this Sta	tement and to	the best of	my knowledge a	and belief it is	true, corre	ect and comp	olete.	
Si	gnature of Candidate					Date				
CA	ARRA, STEPHEN, , ,					02/03/20	22			
				[Elec	tronically Filed]	02/03/20				
NC	OTE: Submission of false, error	neous, or incomplete	information r	nay subject	the person signii	ng this Stater	nent to per	nalties of 2 U	l.S.C. §437g.	
NC	OTE: Submission of false, error	neous, or incomplete	information r	nay subject	the person signi	ng this Stater	nent to per	nalties of 2 U	l.S.C. §437g.	
NC	OTE: Submission of false, error	neous, or incomplete	information r	nay subject	the person signi	ng this Stater	nent to per	nalties of 2 U	l.S.C. §437g.	

FEC FORM 2 (REV. 02/2009)