FEC FORM 2 STATEMENT OF CANDIDACY



<u> </u>				
1. (a) Name of Candidate (in full) VALENCE LEE WILLIS, AH, BA, MAZOZS JUN 16 (b) Address (number and street) Check if address changed 2 FEC Candidate Identification Number				
(b) Address (number and street)				
(c) City, State, and ZIP Code ESSEXU. (le, MICH) 48732 3. Is This New Statement (N) OR (A)				
4. Party Affiliation 5. Office Sought 6. State & District of Candidate NDEPENDENT US Senator MICH-STATICUL DE				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE				
7. Thereby 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) VO TEW (LUS FOR US SENATE MICH 164N 2026				
(b) Address (number and street) Po Box 1633				
(c) City, State, and ZIP Code BAYCITY, MICH 48706				
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.				
\sim /A				
(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 Dalerie L. WILLAS Date 5-29-2025				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.				
9-00068 FEC FORM 2 (REV. 02/2009)				

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

•	candidacy. NOTE : This designation should be filed with the principal campaign committee.		
	(a) Name of Committee (in full) W		
	(b) Address (number and street)		
	(c) City, State, and ZIP Code		
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		
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		
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	(a) Name of Committee (in full)		
	(b) Address (number and street)		
	(c) City, State, and ZIP Code		

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Federal Election Commission				
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Overnight Delivery Service (Specify):	Shipping Date Date of Receipt			
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Other (Specify):	Date of Receipt or Postmarked			
	DATE BOEDADED			
(4/2023)	DATE PREPARED			