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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Larsen, Kle, , ,		2. Candidate's FEC Identification Number H6IA04191	
(b) Address (number and street) PO Box 132		3. Is This Statement <input checked="" type="checkbox"/> New (N) <input type="checkbox"/> OR <input type="checkbox"/> Amended (A)	
(c) City, State, and ZIP Code Humboldt		IA	50548
4. Party Affiliation Rep	5. Office Sought House	6. State & District of Candidate IA 04	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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) Kyle Larsen for Iowa	
(b) Address (number and street) PO Box 132	
(c) City, State, and ZIP Code Humboldt IA IA 50548	

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 Larsen, Kyle, , ,	Date 07/14/2025
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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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