FEC FORM 2 STATEMENT OF CANDIDACY

| DECE | MED | |
|-------------|----------|------|
| RECEI | (* C. U | 000 |
| - 2 3 13 13 | 4.4 | T 17 |

| 1. (a) Name of Candidate (in full) Mich del Bickelme | 2026 OCT - 1 PH 12: G4 | |
|--|---|--|
| (b) Address (number and street) Check if address changed, | | |
| Brunswick, Ohio 44212 | 3. Is This New Amended | |
| 4. Party Affiliation 5. Office Sought | 6. State & District of Candidate | |
| Republican President | | |
| DESIGNATION OF PRINCIPAL | CAMPAIGN COMMITTEE | |
| 7. I hereby designate the following named political committee as my Principal Campaign Committee for the QQQ (year of election(s). NOTE: This designation should be filed with the appropriate office listed in the instructions. | | |
| (a) Name of Committee (in full) | | |
| COMMITTEE TO ELECT MI (b) Address (number and street) | CHAEL BICKELMEYER | |
| 399 Pear Road (c) City, State, and ZIP Code | | |
| Brunswick, Ohio 44212 | | |
| DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) | | |
| I hereby authorize the following named committee, which is NOT my principal 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 m | ny knowledge and belief it is true, correct and complete. | |
| Signature of Candidate | Date | |
| Markard Buke hours | 09-30-2020 | |
| NOTE: Submission of false, erroneous, or incomplete information may subject the | | |
| | | |
| 9-00068 | | |
| | FEC FORM 2 (REV. 02/2009) | |

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

| Page | of | |
|------|----|--|
| rage | OI | |

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

| I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of mandadadadadadadadadadadadadadadadadadad | | |
|--|--|---|
| | (a) Name of Committee (in full) | |
| | | |
| | (b) Address (number and street) | |
| | | |
| | (c) City, State, and ZIP Code | |
| CONTRACT | | |
| | | |
| 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) | |
| | (b) Address (Hulliber 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) | |
| | (A) / Mail Sol and Street | |
| | | |
| | (c) City, State, and ZtP Code | |
| | , and the second se | |
| | | |
| 5 | I hovely a the fact that I like | |
| . | 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) | |
| | | ٠ |
| | (b) Address (number and street) | |
| | | |
| , | / \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | |
| | (c) City, State, and ZIP Code | |
| 1 | î . | |

5

4712

RECEIVED TO MAKE THE STATE OF T

2025 OCT - 1 PN 22: 04



Federal Election Commission 1050 First Street N.E. Washington, DC.

| THE . MEET . COME | |
|-------------------|--|
| | |
| | |

| The F | ENVELOPE REPLACI | ederal Election Comp EMENT PAGE FOR the end of this filing | mission INCOMING DOCUMENTS g to indicate how it was received. |
|----------|-------------------------|--|---|
| Hai | nd Delivered | | Date of Receipt |
| N 110 | 20 5: 0 | Postmarked | Date of Receipt |
| V US | PS First Class Mail | 09-21-20 | 10/01/20 |
| usı | PS Registered/Certified | i | Postmarked (R/C) |
| USI | PS Priority Mail | c | Postmarked |
| US! | PS Priority Mail Expres | s | Postmarked |
| Pos | tmark Illegible | | |
| No I | Postmark | | |
| Ove | rnight Delivery Service | (Specify): | Shipping Date |
| | | No. | ext Business Day Delivery |
| Rec | eived from House Reco | ords & Registration | Date of Receipt Office |
| Rec | eived from Senate Pub | lic Records Office | Date of Receipt |
| Rece | eived from Electronic F | iling Office | Date of Receipt |
| Othe | er (Specify): | 1 | Date of Receipt or Postmarked |
| 9 | | | la la la |
| PREPARE | R | | 10 06 20 DATE PREPARED |
| (3/2015) | | | DATE FREFARED |