I	1					
1	☐ EXPEDITE	1				
2	□ No hearing set					
	☐ ☑ Hearing is set					
3	Date: January 18, 2024					
4	Time: 8:30 am					
5	Judge: Hon. Mary Sue Wilson					
	STATE OF V	Vashington				
6		Y SUPERIOR COURT				
7						
8						
		•				
9	In re Donald J. Trump	No. 24-2-00119-34				
10	The RE E Offinee J. Thomas	DECLARATION OF JOEL ARD IN SUPPORT OF WSRP OPPOSITION				
11		SUPPORT OF WSRP OPPOSITION				
12						
13	I, Joel Ard, declare as follows under pena	alty of perjury of the laws of the United States:				
14	1. I am an attorney with Ard Law Gro	up PLLC. I have personal knowledge of the facts				
15	stated in this Declaration and am cor	npetent to testify to them.				
16	2. Attached hereto as Exhibit A is a true	e and correct copy of a letter posted on the website				
17	of the Secretary of State of the State	of Washington.				
18	3. Attached hereto as Exhibit B is a true and correct copy of a FEC Form 2 "Statement of					
19	Candidacy" I retrieved from the website of the Federal Elections Commission.					
20	Signed this January 17, 2024 at Bainbridge Island, Washington.					
21						
22						
	\					
23	D					
25	By:	el B. Ard, WSBA # 40104				
26		1 D. Mu, WODA # 70107				
-0	V					
27						

ARD DECL. ISO WSRP OPPOSITION

 ${\tt Ard} \; {\tt Law} \; {\tt Group} \, {\tt PLLC}$

In re Donald J. Trump, No. 24-2-00119-34 (Thurston C'ty Sup. Ct.)

P.O. Box 11633 Bainbridge Island, WA 98110 Phone: (206) 701-9243

EX.

A

Elections Division

TO COUNTY AUDITORS:

I, Steve Hobbs, Secretary of State of the state of Washington, certify the persons whose names appear on the list below are the same as those submitted by the chair of each major political party.

The names of the candidates on this list, which is transmitted pursuant to RCW 29A.56.031, are to be printed by all County Auditors on the official ballots to be used for the Tuesday, March 12, 2024 Presidential Primary.

The candidates for each office are listed in accordance with RCW 29A.56.031 and must appear on the Presidential Primary in the order listed below.

Democratic Party	Republican Party
Joseph R Biden Jr	Chris Christie
Dean Phillips	Ron DeSantis
Marianne Williamson	Nikki Haley
Uncommitted Delegates	Vivek Ramaswamy
	Donald J. Trump



IN WITNESS WHEREOF, I have set my hand and affixed the official seal of the state of Washington, this 9th day of January, 2024.

Hall

Steve R. Hobbs Secretary of State



Washington State Republican Party

January 8, 2024

Dear Secretary Hobbs,

Below is the official candidate list from the Republican Party for the Washington State Presidential Primary held on March 12, 2024 in accordance with RCW 29A.56.031.

The uncommitted option does not apply to the Republican Party.

Official list of candidate names and ballot names are as follows:

Donald J. Trump

Ron DeSantis

Nikki Haley

Vivek Ramaswamy

Chris Christie

Jim Walsh Chairman

Washington State Republican Party



January 9, 2024

Dear Secretary Hobbs,

Below is the official candidate list from the **Democratic Party** for the Washington State Presidential Primary held on March 12, 2024 in accordance with RCW 29A.56.031.

All candidates on this list will appear on the ballot exactly as their "ballot name" is spelled, and in alphabetical order by last name.

The uncommitted option applies to the **Democratic Party**. (Check if this applies.)

RCW 29A.56.040 (4) states, "If requested by a party chair, the ballot for that party must contain a place for a voter to indicate a preference for having delegates to the party's national convention remain uncommitted. A request under this subsection must be submitted to the secretary of state no later than sixty-three days before the presidential primary."

Official List of Candidate Names:

Joseph R Biden Jr	Joseph R Biden Jr		
full name	ballot name		
Dean Phillips	Dean Phillips		
full name	ballot name		
Marianne Williamson	Marianne Williamson		
full name	ballot name		

Shasti Conrad

Chair

Washington State Democratic Party

Masti Consul

EX.

Image# 202312119599436958 PAGE 1 / 2

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Ca	` ,									
(b) Address (no	DONALD, J., , umber and street)	☐ Check if address changed			2. Candidate's FEC Identification Number					
P.O. BOX 1		· ·			P80001571					
(c) City, State, ARLINGT			VA	22219	9	3. Is This Staten			×	Amended (A)
4. Party Affiliation		5. Office Soug			6. State & Dis		date			
REPUBLICAI	N PARTY	Presidenti	al			00				
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7. I hereby design	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)									
NOTE: This de	esignation should be f	iled with the ap	propriate offic	ce listed in th	ne instructions.					
(a) Name of Co	ommittee (in full)									
DONALD J. TRUMP FOR PRESIDENT 2024, INC.										
(b) Address (no	umber and street)									-
P.O. BOX	(13570									
(c) City, State,	and ZIP Code									
ARLING	TON				VA	22219)			
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								half of my		
candidacy. NOTE: This de	esignation should be f	iled with the pri	ncipal campa	ign committe	ee.					
(a) Name of Co	ommittee (in full)									
TRUM	IP SAVE AME	ERICA JO	INT FUN	IDRAIS	ING COM	IMITTEE				
(b) Address (no	umber and street)									
P.O. BOX	13570									
(c) City, State,	and ZIP Code									-
ARLINGT	TON				VA	22219				
1	certify that I have exa	mined this Stat	ement and to	the best of i	my knowledge i	and belief it is	s true, correct a	and compl	ete.	
Signature of Can	<u> </u>					Date				
TRUMP, DONALD, J., ,				12/11/2023						
	_, ., ,									
NOTE: Submissio	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	² of	2	
rage	OI		

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) (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 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								
(b) Address (number and street) PO BOX 606 (c) City, State, and ZIP Code TARPON SPRINGS FL 34688 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds 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 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 candidacy. NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)								
PO BOX 606 (c) City, State, and ZIP Code TARPON SPRINGS FL 34688 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds 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 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 candidacy. NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds candidacy. NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds 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 TARPON SPRINGS FL 34688 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds 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 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 candidacy. NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)		(b) Address (number and street)						
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds 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 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 candidacy. NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)		PO BOX 606						
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds 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 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 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						
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 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 candidacy. NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)		TARPON SPRINGS FL 34688						
(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 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 candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street)		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.						
(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 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 candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street)	-	(a) Name of Committee (in full)						
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds 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 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 (number and street)						
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 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						
(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 candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street)			-					
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds 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 (number and street)						
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						
(b) Address (number and street)		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)						
(c) City, State, and ZIP Code	-	(b) Address (number and street)						
	-	(c) City, State, and ZIP Code						