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Image# 201902119145496230

## FEC FORM 2

## STATEMENT OF CANDIDACY

1	(a) Name of Candidate (in full	`											
١.	(a) Name of Candidate (in full	)											
	<u> </u>	Steube, Greg, , ,  b) Address (number and street)   Check if address changed						4-2- FFO Id	tifi	tion N	li ina la a u		
	(b) Address (number and stree 5317 Fruitville Rd 102	et)		Candidate's FEC Identification Number     H8FL17053									
	(c) City, State, and ZIP Code					3. Is This		New		Amended			
	Sarasota		FL 34232			Staten	nent 🗶 (	N)	OR	(A)			
4.	Party Affiliation		5. Office Sought 6. State & Dis			trict of Candid	date						
	REPUBLICAN PARTY		House			FL	17						
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE												
7.	Thereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)												
	NOTE: This designation shou		led with the ap	propriate offi	ce listed in th	ne instructions.							
	(a) Name of Committee (in ful	,											
	Greg Steube for Congress												
	(b) Address (number and stre	et)											
	5317 Fruitville Rd												
	#102												
	(c) City, State, and ZIP Code												
	Sarasota					FL	34232	2					
		DE	CICNIATIO		UED ALI	TUODIZED.	COMMIT	TEEC					
		DE				<b>THORIZED</b> g Representativ		IEES					
Ω	I hereby authorize the following	a nam	ed committee	which is NO	E my princip	al campaign cor	mmittee to re	ocaive and a	vnand	funde	on hehalf of my		
0.	candidacy.	ig mam	ea committee,	WIIICII IS INO	i iliy pililoipe	ar campaigir coi	minitee, to re	ceive and e	хрепи	Turius	on benan or my		
	odificiacy.												
	NOTE: This designation should be filed with the principal campaign committee.												
	(a) Name of Committee (in ful	l)											
	Greg Steube for	Cor	ngress										
	(b) Address (number and stre	et)											
	5317 Fruitville Rd												
	#102												
	(c) City, State, and ZIP Code												
	Sarasota					FL	34232						
	I certify that I have	/e exai	mined this Stat	ement and to	the best of i	my knowledge a	and belief it is	true, correc	ct and o	comple	ete.		
Sig	Signature of Candidate						Date						
Steube, Greg, , ,							02/11/20	10					
[Electronically Filed] 02/11/2019													
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

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## **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. <b>NOTE</b> : This designation should be filed with the principal campaign committee.									
	a) Name of Committee (in full)									
	Greg Steube Victory Fund									
	(b) Address (number and street) 499 South Captiol Street SW #407									
	(c) City, State, and ZIP Code									
	Washington DC 20003									
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. <b>NOTE</b> : 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. <b>NOTE</b> : 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. <b>NOTE</b> : 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									