

Image# 202101319423671464

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Valadao, David, , ,			2. Candidate's FEC Identification Number H2CA20094	
(b) Address (number and street) 5132 N Palm Ave #227		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Fresno CA 93704		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate CA 21		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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) Valadao For Congress		
(b) Address (number and street) 5132 North Palm Avenue #227		
(c) City, State, and ZIP Code Fresno CA 93704		

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) Vitoria PAC		
(b) Address (number and street) 5132 North Palm Avenue #227		
(c) City, State, and ZIP Code Fresno CA 93704		

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 Valadao, David, , , <i>[Electronically Filed]</i>	Date 01/31/2021
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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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Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

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)

Take Back the House 2022

(b) Address (number and street)

PO Box 30844

(c) City, State, and ZIP Code

Bethesda

MD

20824-0844

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)

McCarthy Valadao Victory Fund

(b) Address (number and street)

PO Box 30844

(c) City, State, and ZIP Code

Bethesda

MD

20824

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)

The Valadao Victory Fund

(b) Address (number and street)

5132 N Palm Ave #227

(c) City, State, and ZIP Code

Fresno

CA

93704

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)

Gt Farm Team

(b) Address (number and street)

PO Box 30844

(c) City, State, and ZIP Code

Bethesda

MD

20824

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

Valadao for Ca-21

(b) Address (number and street)

PO Box 30844

(c) City, State, and ZIP Code

Bethesda

MD

20824

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

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