

Image# 201703019050589713

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Issa, Darrell, , ,			2. Candidate's FEC Identification Number H0CA48024	
(b) Address (number and street) PO Box 760		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Vista CA 92085		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate CA 49		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) Issa for Congress		
(b) Address (number and street) PO Box 760		
(c) City, State, and ZIP Code Vista CA 92085		

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) Darrell Issa Victory Fund		
(b) Address (number and street) 1800 Thibodo Rd., Ste. 300		
(c) City, State, and ZIP Code Vista CA 92081		

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 Issa, Darrell, , , <i>[Electronically Filed]</i>	Date 11/16/2016
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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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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(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 my candidacy.

NOTE:This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Patriot Day|2017

(b) Address (number and street)

PO Box 9891

(c) City, State and ZIP Code

Arlington

VA

22219

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(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 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

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(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 my candidacy.

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(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code