FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full)			
Valadao, David, , ,			
(b) Address (number and street) 5132 N Palm Ave #227	□ Check if address ch	nanged	2. Candidate's FEC Identification Number H2CA20094
(c) City, State, and ZIP Code			3. Is This New Amended
Fresno	CA	93704	Statement (N) OR 🗶 (A)
4. Party Affiliation	5. Office Sought	6. State & Distr	ict of Candidate
REPUBLICAN PARTY	House	CA	22
DE	SIGNATION OF PRINC	IPAL CAMPAIGN	
7. I hereby designate the following nar	ned political committee as my Pr	incipal Campaign Comm	hittee for the $\frac{2022}{(\text{year of election})}$ election(s).
NOTE: This designation should be f	iled with the appropriate office lis	ted in the instructions.	
(a) Name of Committee (in full)			
Valadao For Congre	ess		
(b) Address (number and street) 5132 North Palm Avenue			
#227			
(c) City, State, and ZIP Code			
Fresno		CA	93704
DE	SIGNATION OF OTHER	R AUTHORIZED	
 I hereby authorize the following nam candidacy. 	ned committee, which is NOT my	principal campaign com	mittee, to receive and expend funds on behalf of my
NOTE: This designation should be f	led with the principal campaign o	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 exa	mined this Statement and to the	best of my knowledge a	nd belief it is true, correct and complete.
Signature of Candidate			Date
Valadao, David, , ,			02/24/2022
		[Electronically Filed]	02/24/2022
NOTE: Submission of false, erroneous,	or incomplete information may s	ubject the person signin	g 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

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)			
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.

МО	20824
טועו	20024
	MD

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)		
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)		
2022 Phase 1 Patriot Day JFC		
-		
(b) Address (number and street) 228 S. Washington Street		
Suite 115		
(c) City, State, and ZIP Code		
Alexandria	VA	22314

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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)	
(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)	

(c) City, State, and ZIP Code

(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 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