

Image# 202011249337126009

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FEC FORM 2

STATEMENT OF CANDIDACY

| | | | | |
|---|---------------------------|--|---|--|
| 1. (a) Name of Candidate (in full) Roy, Chip, , , | | | 2. Candidate's FEC Identification Number H8TX21307 | |
| (b) Address (number and street) 6705 W. Hwy 290 Suite 50295 | | <input type="checkbox"/> Check if address changed | | |
| (c) City, State, and ZIP Code AUSTIN TX 78735 | | 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 TX 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) Chip Roy for Congress | | |
| (b) Address (number and street) 6705 W. Hwy 290 Suite 50295 | | |
| (c) City, State, and ZIP Code Austin TX 78735 | | |

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) Texas Victory Fund | | |
| (b) Address (number and street) Po Box 3653 | | |
| (c) City, State, and ZIP Code Dublin OH 43016 | | |

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 Roy, Chip, , , [Electronically Filed] | Date 11/24/2020 |
|--|--------------------|

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 CommitteesPage 2 of 2

FEC Form 2S (Revised 02/2017)

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

Take Back the House 2020

(b) Address (number and street)

PO Box 30844

(c) City, State, and ZIP Code

Bethesda

MD

20824

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Take Back the House Texas 2020

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