FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 3

1.	(a) Name of Candidate (in full)										
	FREITAS, NICK, J, , (b) Address (number and street)	Check if address changed				2. Candidate's FEC Identification Number					
	PO BOX 113					H0VA07158					
	(c) City, State, and ZIP Code						lew Amended				
	CULPEPER		VA	2270			N) OR 🗡 (A)				
4.	Party Affiliation	5. Office Sough	nt		6. State & Dist VA	rict of Candidate 07					
	REPUBLICAN PARTY	House			VA	07					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) FRIENDS OF NICK FREITAS INC										
	(b) Address (number and street) PO BOX 113										
	(c) City, State, and ZIP Code										
	CULPEPER				VA	22701					
	DE	SIGNATIO				COMMITTEES					
				-	g Representativ						
8.	I hereby authorize the following nan	ned committee,	which is NO	T my princip	al campaign cor	nmittee, to receive and ex	pend funds on behalf of my				
	candidacy.										
NOTE: This designation should be filed with the principal campaign committee.											
	(a) Name of Committee (in full)										
FREEDOMWORKS VICTORY 2020											
	(b) Address (number and street)										
	PO BOX 26141										
	(c) City, State, and ZIP Code										
	ALEXANDRIA				VA	22313					
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.											
				ine best of	my knowledge a						
	gnature of Candidate					Date					
F	REITAS, NICK, J, ,			[Elec	tronically Filed]	08/06/2020					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											
L											

FEC FORM 2 (REV. 02/2009)

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F2A Transaction ID :

2020 Special Election.

Form/Schedule: Transaction ID: Image# 202008069261265050

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.

(b) Address (number and street) PO BOX 30844		
(c) City, State, and ZIP Code		
BETHESDA	MD	20824
	which is NOT my principal campaign c	ommittee, to receive and expend funds on behalf of my
		ommittee, to receive and expend funds on behalf of my
I hereby authorize the following named committee		-
I hereby authorize the following named committee, candidacy. NOTE : This designation should be filed	I with the principal campaign committee	

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.

ТΧ

78734

(a) Name of Committee (in full)			
TEAM NICK			
(b) Address (number and street) 824 S. MILLEDGE AVE. STE. 101			
(a) City State and ZID Code			
(c) City, State, and ZIP Code			
ATHENS	GA	30605	

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)

AUSTIN

(c) City, State, and ZIP Code