

FEC FORM 2
STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) <i>Todd Phelps</i>		
(b) Address (number and street) <input type="checkbox"/> Check if address changed <i>500 E. 4th St. #424</i>		2. FEC Candidate Identification Number <i>TO BE ASSIGNED</i>
(c) City, State, and ZIP Code <i>Austin TX- 78701</i>		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation <i>Republican</i>	5. Office Sought <i>U.S Representative House</i>	6. State & District of Candidate <i>Texas, District 21</i>

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) <i>Todd Phelps For Congress</i>		
(b) Address (number and street) <i>500 E. 4th St. #424</i>		
(c) City, State, and ZIP Code <i>Austin, TX, 78701</i>		

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.

<i>NA</i>		
(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State, and ZIP Code		

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 <i>Todd Phelps</i>	Date <i>11/24/2015</i>
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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 PREPARER
 (3/2015)

12/16/15
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