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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) JACOBS, CHRISTOPHER, L., ,		2. Candidate's FEC Identification Number HONY27090
(b) Address (number and street) PO BOX 387		<input checked="" type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code CLARENCE NY 14031		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 NY 27

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) JACOBS FOR CONGRESS		
(b) Address (number and street) PO BOX 387		
(c) City, State, and ZIP Code CLARENCE NY 14031		

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) JACOBS VICTORY COMMITTEE		
(b) Address (number and street) 228 S WASHINGTON STREET SUITE 115		
(c) City, State, and ZIP Code ALEXANDRIA VA 22314		

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 JACOBS, CHRISTOPHER, L., , [Electronically Filed]	Date 03/02/2021
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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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