Image# 202503219754469108 PAGE 1 / 2

FEC FORM 2

STATEMENT OF CANDIDACY

| _ | | | | | | | | | |
|--|--|----------------------------|---------------|------------------|-----------------------|----------------|--------------|--------|---------|
| 1. | (a) Name of Candidate (in full) | | | | | | | | |
| | HUIZENGA, WILLIAM, P, , (b) Address (number and street) 14071 GEORGIAN BAY DR | ☐ Check if add | ress changed | I | 2. Candida | ite's FEC Iden | tification N | umber | |
| | (c) City, State, and ZIP Code | | | | 3. Is This | | •W | | Amended |
| | HOLLAND | | ИI 494 | | Statem | |) OR | × | (A) |
| 4. | Party Affiliation REPUBLICAN PARTY | 5. Office Sought House | | 6. State & Dis | trict of Candic 04 | date | | | |
| DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE | | | | | | | | | |
| 7. | I hereby designate the following nar | med political committee as | my Principal | Campaign Com | mittee for the | | electio | on(s). | |
| | (year of election) NOTE: This designation should be filed with the appropriate office listed in the instructions. | | | | | | | | |
| | (a) Name of Committee (in full) | | | | | | | | |
| | HUIZENGA FOR CO | ONGRESS | | | | | | | |
| | (b) Address (number and street) | | | | | | | | |
| | PO Box 254 | | | | | | | | |
| | (c) City, State, and ZIP Code | | | | | | | | |
| | Zeeland | | | MI | 49464 | -1509 | | | |
| 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) | | | | | | | | | |
| TEAM HUIZENGA | | | | | | | | | |
| | (b) Address (number and street) PO BOX 2485 | | | | | | | | |
| | (c) City, State, and ZIP Code | | | | | | | | |
| | SPRINGFIELD | | | VA | 22152 | | | | |
| | I certify that I have exa | nmined this Statement and | to the best o | f my knowledge a | and belief it is | true, correct | and comple | ete. | |
| Si | Signature of Candidate Date | | | | | | | | |
| HUIZENGA, WILLIAM, P, , | | | | 03/21/202 | 25 | | | | |
| 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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FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

| Page | ² of | 2 |
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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

| (Including Joint Fundraising Representatives | (Including | Joint F | undraisina | Represe | entatives) |
|--|------------|---------|------------|---------|------------|
|--|------------|---------|------------|---------|------------|

| (a) Name of Committee (in full) WESTERN MICHIGAN VICTORY FUND (b) Address (number and street) 229 S. WASHINGTON STREET SUITE 115 (c) City, State, and ZIP Code ALEXANDRIA NAME COMMITTEE This designation should be filed with the principal campaign committee, to receive and expend funds on behalf of recardidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) STRONGEST AMERICA JFC (b) Address (number and street) 324 S MILLEDGE AVE STE 101 (c) City, State, and ZIP Code ATHENS 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 reandidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) AMERICAN BATTLEGROUND FUND (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 reandidacy. NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds on behalf of reandidacy. NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds on behalf of reandidacy. NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds on behalf of reandidacy. NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds on behalf of reandidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) GROW THE MAJORITY (b) Address (number and street) 228 SWASHINGTON ST STE 115 (c) City, State, and ZIP Code | 8. | ereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my ndidacy. NOTE : This designation should be filed with the principal campaign committee. | | | | | | |
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