

Image# 202111099468447117

# FEC FORM 2

## STATEMENT OF CANDIDACY

|                                                                                                  |                           |                                                                                                          |
|--------------------------------------------------------------------------------------------------|---------------------------|----------------------------------------------------------------------------------------------------------|
| 1. (a) Name of Candidate (in full)<br>Foxx, Virginia, Ann, ,                                     |                           | 2. Candidate's FEC Identification Number<br>H4NC05146                                                    |
| (b) Address (number and street) <input type="checkbox"/> Check if address changed<br>PO Box 2676 |                           | 3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A) |
| (c) City, State, and ZIP Code<br>Boone NC 28607                                                  |                           |                                                                                                          |
| 4. Party Affiliation<br>REPUBLICAN PARTY                                                         | 5. Office Sought<br>House | 6. State & District of Candidate<br>NC 11                                                                |

### 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)<br>Virginia Foxx for Congress |  |
| (b) Address (number and street)<br>PO Box 2676                |  |
| (c) City, State, and ZIP Code<br>Boone NC 28607               |  |

### 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) |  |
| (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<br>Foxx, Virginia, Ann, ,<br><br><i>[Electronically Filed]</i> | Date<br>11/08/2021 |
|---------------------------------------------------------------------------------------|--------------------|

**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 Committees

FEC Form 2S (Revised 02/2017)

**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)

Foxx Victory Federal Committee

(b) Address (number and street)

1909 K Street, NW  
12th Floor

(c) City, State, and ZIP Code

Washington DC 20006

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)

(c) City, State, and ZIP Code

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(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code