

Image# 202212279574227201

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) BICE, STEPHANIE, , ,			2. Candidate's FEC Identification Number H00K05205		
(b) Address (number and street) PO BOX 21315		<input type="checkbox"/> Check if address changed			
(c) City, State, and ZIP Code OKLAHOMA CITY		OK	73156	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 OK 05			

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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) BICE FOR CONGRESS		
(b) Address (number and street) PO BOX 21315		
(c) City, State, and ZIP Code OKLAHOMA CITY		
	OK	73156

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) BICE VICTORY COMMITTEE		
(b) Address (number and street) PO BOX 21315		
(c) City, State, and ZIP Code OKLAHOMA CITY		
	OK	73156

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 BICE, STEPHANIE, , ,	Date 12/27/2022
<i>[Electronically Filed]</i>	

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)

GOP WINNING WOMEN

(b) Address (number and street)

228 S. WASHINGTON ST.
STE. 115

(c) City, State, and ZIP Code

ALEXANDRIA VA 22314

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)

FRIENDS OF GOP WINNING WOMEN 2022

(b) Address (number and street)

228 S. WASHINGTON ST.
STE. 115

(c) City, State, and ZIP Code

ALEXANDRIA VA 22314

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)

AMERICA STRONG

(b) Address (number and street)

PO BOX 9891

(c) City, State, and ZIP Code

ARLINGTON VA 22219

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