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FEC FORM 2

STATEMENT OF CANDIDACY

_							
1.	(a) Name of Candidate (in full)						
	CLINE, BENJAMIN, LEE, , (b) Address (number and street)	☐ Check if address changed				2. Candidate's FEC Identification Number	
	P.O. BOX 797	er and streety — — Oneck if address changed				H8VA06104	
	(c) City, State, and ZIP Code				_	3. Is This New Amended	
_	FINCASTLE	F 0#: 0	VA	2409		Statement (N) OR (A)	
4.	Party Affiliation REPUBLICAN PARTY	Office Sough House	nt		VA	trict of Candidate 06	
THE COLLONIA THE C							
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE							
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election)						
	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
	(a) Name of Committee (in full)						
	BEN CLINE FOR CONGRESS, INC.						
	(b) Address (number and street)						
	P.O. BOX 1536						
	(c) City, State, and ZIP Code						
	LEESBURG				VA	20177	
_							
	DE	SIGNATIO	N OF OT	HER AU	THORIZED	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.							
Si	Signature of Candidate Date						
	CLINE, BENJAMIN, LEE, ,					02/21/2025	
Č	EIIIE, EEIIIIIIIIII, EEE, ,					32/2 1/2020	
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NO	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)