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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Feenstra, Randall, , ,  (b) Address (number and street)		heck if addr	ess changed		2. Candidate's FEC Iden	tification Number
	641 2nd St		ncok ii adan	coo changea		H0IA04145	
	(c) City, State, and ZIP Code				10.7000	3. Is This Ne	
1	Hull Party Affiliation	E Office Sour	l/	4 5123	9-7323	Statement (N)	OR (A)
4.	REPUBLICAN PARTY	5. Office Soug House	III		IA	04	
	DE	SIGNATIO	N OF PR	RINCIPAL	CAMPAIG	N COMMITTEE	
7.	I hereby designate the following nar	med political co	mmittee as ı	my Principal	Campaign Comr	mittee for the 2026 (year of elect	election(s).
	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
	(a) Name of Committee (in full)						
	FEENSTRA FOR CO	ONGRES	S				
	(b) Address (number and street)						
	641 2nd St						
	(c) City, State, and ZIP Code						
	Hull				IA	51239-7323	
8.	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 f	iled with the pri	ncinal camp	aign commit	ee.		
	(a) Name of Committee (in full)						
	GT Farm Team III						
	(b) Address (number and street)						
	PO Box 30844						
	(c) City, State, and ZIP Code						
	Bethesda				MD	20824-0844	
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.							
Si	gnature of Candidate					Date	
F	eenstra, Randall, , ,					11/11/2024	
NC	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.						

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.						
	(a) Name of Committee (in full)						
	Feenstra Victory Fund						
	(b) Address (number and street)						
	641 2nd Street						
	(c) City, State, and ZIP Code						
	Hull	IA	51239				
3.	I hereby authorize the following named committee, which is NOT my princicandidacy. <b>NOTE</b> : This designation should be filed with the principal camp						
	(a) Name of Committee (in full)						
	FRESHMAN AGRICULTURAL REPUBLICAN N	/IEMBERS	S TRUST AKA FARM TRUST				
	(b) Address (number and street) PO BOX 30844						
	(c) City, State, and ZIP Code						
	BETHESDA	MD	20824				
3.	I hereby authorize the following named committee, which is NOT my princicandidacy. NOTE: This designation should be filed with the principal camp						
	(a) Name of Committee (in full)						
	GT FARM TEAM 2024						
	(b) Address (number and street) PO BOX 30844						
	(c) City, State, and ZIP Code						
	BETHESDA	MD	20824				
3.	. 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)  FOUNDING FATHERS VICTORY FUND						
	(b) Address (number and street)						
	C/O RED CURVE SOLUTIONS						
	138 CONANT ST, 2ND FL						
	(c) City, State, and ZIP Code BEVERLY	MA	01915				
	DE ( E ( E )	IVIA	01010				

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

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**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. <b>NOTE</b> : This designation should be filed with the principal campaign committee.						
	(a) Name of Committee (in full)						
	IOWA VICTORY FUND						
	(b) Address (number and street) 824 S. MILLEDGE AVE STE 101						
	(c) City, State, and ZIP Code ATHENS	šΑ	30605				
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. <b>NOTE</b> : This designation should be filed with the principal campaign committee.						
	(a) Name of Committee (in full)						
	IOWA VICTORY FUND 2024						
	(b) Address (number and street) 320 FIRST STREET SE						
	(c) City, State, and ZIP Code						
	WASHINGTON		20003				
8.	8. I hereby authorize the following named committee, which is NOT my principal ca candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign of (a) Name of Committee (in full)		mittee, to receive and expend funds on behalf of my				
	(b) Address (number and street)						
	(c) City, State, and ZIP Code						
8.	<ol> <li>I hereby authorize the following named committee, which is NOT my principal ca candidacy. NOTE: This designation should be filed with the principal campaign of</li> </ol>		mittee, to receive and expend funds on behalf of my				
	(a) Name of Committee (in full)						
	(b) Address (number and street)						
	(c) City, State, and ZIP Code						