

Image# 202512309793866295

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FEC FORM 2

STATEMENT OF CANDIDACY

| | | |
|---|--|--|
| 1. (a) Name of Candidate (in full) STEINMANN, JESSICA, HART, , | | |
| (b) Address (number and street) PO BOX 831 | | <input type="checkbox"/> Check if address changed |
| (c) City, State, and ZIP Code CONROE TX 77305 | | 2. Candidate's FEC Identification Number H6TX08209 |
| 4. Party Affiliation REPUBLICAN PARTY | | 5. Office Sought House |
| 6. State & District of Candidate TX 08 | | 3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A) |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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) JESSICA STEINMANN FOR CONGRESS | | |
| (b) Address (number and street) PO BOX 831 | | |
| (c) City, State, and ZIP Code CONROE TX 77305 | | |

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) JESSICA STEINMANN VICTORY FUND | | |
| (b) Address (number and street) PO BOX 831 | | |
| (c) City, State, and ZIP Code CONROE TX 77305 | | |

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 STEINMANN, JESSICA, HART, , | Date 12/30/2025 |
|---|--------------------|

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 CommitteesPage 2 of 2

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)

WINNING EDGE FUND

(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)

(b) Address (number and street)

(c) City, State, and ZIP Code

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

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