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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Worthen, Robert, , ,			2. Candidate's FEC Identification Number HOTX04235	
(b) Address (number and street) 197 W Starlite Dr		☐ Check if address changed		
(c) City, State, and ZIP Code Texarkana TX 75501		3. Is This Statement ☒ New (N) OR ☐ Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate TX 04		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) Bob Worthen Campaign		
(b) Address (number and street) 3425 New Boston Rd		
(c) City, State, and ZIP Code Texarkana TX 75501		

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 Worthen, Robert, W, , [Electronically Filed]	Date 07/22/2020
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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 MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F2N

Transaction ID :

2020 Special Election.

Form/Schedule:

Transaction ID: