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FEC FORM 2

STATEMENT OF CANDIDACY

_										
1.	(a) Name of Candidate (in full)									
	Nehls, Troy, , ,									
	(b) Address (number and street) 15500 Voss Road Suite 518	☐ Check if address changed			Candidate's FEC Identification Number H0TX22302					
	(c) City, State, and ZIP Code					3. Is This	Nev	N	Amended	
	Sugar Land		TX	7749	3	Stateme	ent (N)	OR	× (A)	
4.	Party Affiliation	5. Office Sou	ght		6. State & Dis	trict of Candida	ate			
	REPUBLICAN PARTY	House			TX	22				
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
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)									
	NEHLS FOR CONGRESS									
	(b) Address (number and street)									
	PO BOX 16968									
	(c) City, State, and ZIP Code									
	SUGAR LAND				TX	77496				
	DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)									
8.	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 pr	incipal campa	ign committe	ee.					
	(a) Name of Committee (in full)									
	TEXAS RELOADE)								
	(b) Address (number and street) 5900 MEMORIAL DR STE 21	5								
	(c) City, State, and ZIP Code									
	HOUSTON				TX	77007				
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						Date ·				
N	Tehls, Troy, , ,					11/11/202	24			
	,									
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)

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)									
	RECONNECTING URBAN AND RURAL AMERICAN LIFE									
	(b) Address (number and street)									
	228 S. WASHINGTON ST. STE. 115									
	(c) City, State, and ZIP Code									
	ALEXANDRIA	VA	22314							
	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)									
	NEHLS VICTORY									
	(b) Address (number and street) PO BOX 16968									
	(c) City, State, and ZIP Code									
	SUGAR LAND	TX	77496							
8.	3. I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE : This designation should be filed with the principal campa (a) Name of Committee (in full)									
	TRANSPORTATION TRUST FUND									
	(b) Address (number and street) 502 6TH STREET									
	(c) City, State, and ZIP Code									
	HUDSON	WI	54016							
8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. 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									