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#### FEC FORM 2

#### STATEMENT OF CANDIDACY

_													
1.		f Candidate (											
		Feenstra, Randall, , ,  a) Address (number and street) ☐ Check if address changed					2. Candidate's FEC Identification Number						
641 2nd St					- Official if address changed			H0IA04145					
(c) City, State, and ZIP Code Hull			Code		IA	51239	9-7323	3. Is Thi Stater		ew I) C	DR	X Amende	ed
4.	Party Affiliat			5. Office Soug	ght		6. State & Dis		date				
	REPUBLIC	CAN PARTY	,	House			IA	04					
			DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIG	N COMM	ITTEE				
7.	I hereby des	signate the fo	ollowing nar	ned political co	ommittee as n	ny Principal (	Campaign Com	mittee for the	year of elec		lection	(s).	
	NOTE: This	designation	should be f	iled with the ap	propriate offi	ce listed in th	ne instructions.						
	(a) Name of	f Committee	(in full)										
				ONGRES	S								
	,	(number and	d street)										
	641 2n	nd St											
	(c) City, Sta	te, and ZIP (	Code										
	Hull						IA	51239	9-7323				
			DE	SIGNATIO	N OF OT	HER AU	THORIZED	СОММІТ	TEES				
				(	Including Joir	nt Fundraisin	g Representati	ves)					
8.	•	thorize the fo	llowing nam	ned committee	, which is NO	T my principa	al campaign co	mmittee, to re	eceive and ex	pend fu	ınds o	n behalf of my	
	candidacy.												
				iled with the pr	incipal campa	ign committe	ee. 						
		f Committee Farm Te											
	GII	-aiiii re	am m										
		(number and	d street)										
	PO Box	x 30844											
	(c) City, Sta	te, and ZIP (	Code										
	Bethes	sda					MD	20824	-0844				
		I certify tha	t I have exa	mined this Sta	tement and to	the best of i	my knowledge	and belief it is	s true, correct	and co	mplet	9.	
Signature of Candidate							Date						
$F_{\epsilon}$	eenstra, Rand	lall, , ,						07/14/20	)24				
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 COM	MITTEES
(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)			_				
	Feenstra Victory Fund							
	(b) Address (number and street)							
	641 2nd Street							
	(c) City, State, and ZIP Code			_				
	Hull	IA	51239					
8.	I hereby authorize the following named committee, which is NOT my candidacy. <b>NOTE</b> : This designation should be filed with the principal							
	(a) Name of Committee (in full)							
	FRESHMAN AGRICULTURAL REPUBLICA	AN MEMBERS	S TRUST AKA FARM TRUST					
	(b) Address (number and street) PO BOX 30844							
	(c) City, State, and ZIP Code							
	BETHESDA	MD	20824					
8.	I hereby authorize the following named committee, which is NOT my candidacy. <b>NOTE</b> : This designation should be filed with the principal (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					
8.	I hereby authorize the following named committee, which is NOT my candidacy. <b>NOTE</b> : This designation should be filed with the principal							
	(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	GA	30605					

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)							
	GT FARM TEAM 2024							
	(b) Address (number and street)							
	PO BOX 30844							
	(c) City, State, and ZIP Code							
	BETHESDA MD 20824							
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)							
	(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. <b>NOTE</b> : 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							