

Image# 201904159146339352

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) BABIN, BRIAN, , ,			2. Candidate's FEC Identification Number H6TX02079	
(b) Address (number and street) PO BOX 159		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code WOODVILLE TX 75979		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate TX 36		

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) DR BRIAN BABIN FOR CONGRESS		
(b) Address (number and street) PO BOX 159		
(c) City, State, and ZIP Code WOODVILLE TX 75979		

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) BABIN HIGGINS VICTORY FUND		
(b) Address (number and street) 1005 CONGRESS AVE SUITE 400		
(c) City, State, and ZIP Code AUSTIN TX 78701		

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 BABIN, BRIAN, , , <i>[Electronically Filed]</i>	Date 04/15/2019
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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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