FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 2

_												
1.	(a) Name of Candidate (in full)											
	Hultgren, Randy, , ,											
	(b) Address (number and street) 12355 Andrew Street	□ Check if address changed			2. Candidate's FEC Identification Number H0IL14080							
	(c) City, State, and ZIP Code						3. Is Th	is	New			Amended
	Plano		I	L	60545	5	State	ment	(N)	OR	×	(A)
4.	Party Affiliation	5. Office Sough	nt			6. State & Distr	rict of Cand	idate				
	REPUBLICAN PARTY	House				IL	14					
	DE	SIGNATIO	N OF PF		PAL	CAMPAIGN		ITTEE				
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 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)											
	Randy Hultgren for Congress											
	(b) Address (number and street)											
	PO Box 717											
	(c) City, State, and ZIP Code											
	St Charles					IL	6017	4-0717				
	DE						CON4141	TTTT				
	DE				-	HORIZED		I I EES				
		(II	Iciuulity Ju	int Fund	laisin	grepiesentative	55)					
8.	I hereby authorize the following nan candidacy.	ed committee,	which is NC	DT my p	rincipa	I campaign com	nmittee, to r	eceive ar	nd expen	d funds	on beh	alf of my
	NOTE: This designation should be f	lod with the priv		aian ca	mmitte							
				aigir co								
	(a) Name of Committee (in full)	0047										
	TEAM TELLURIDE	2017										
	(b) Address (number and street)											
	824 S MILLEDGE AVE STE 101											
	(c) City, State, and ZIP Code											
	ATHENS					GA	3060	5				
	I certify that I have exa	mined this State	ement and t	o the be	est of r	ny knowledge a	nd belief it i	s true, co	orrect and	d comple	ete.	
Si	Signature of Candidate Date											
Η	Hulteren, Randy,											
					[Electi	ronically Filed]	12,10,2	511				
_												
N	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											
1		1		1		1		1				

FEC FORM 2 (REV. 02/2009)

Image# 201712189089215417

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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)						
PEAKS VICTORY COMMITTEE 2018	3					
(b) Address (number and street) 824 S MILLEDGE AVE STE 101						
(c) City, State, and ZIP Code						
ATHENS	GA	30605				
I hereby authorize the following named committee, which is N candidacy. NOTE : This designation should be filed with the p	, , , , , , , , , , , , , , , , , , , ,					
a) Name of Committee (in full)						

REAGAN HERITAGE PAC		
(b) Address (number and street) 824 S MILLEDGE AVE STE 101		
(c) City, State, and ZIP Code		
ATHENS	GA	30605

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