FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full) DAVIDSON, WARREN, , ,							
	(b) Address (number and street) PO Box 518				Candidate's FEC Identification Number			
	(c) City, State, and ZIP Code					H6OH08315 3. Is This Ne	Λmor	ndod
	TROY			H 453		Statement (N		ea
4.	Party Affiliation	5. Office Soug	ght			rict of Candidate		
	REPUBLICAN PARTY	House			ОН	08		
	DE	SIGNATIO	N OF PF	RINCIPAL	. CAMPAIGN	COMMITTEE		
7.	I hereby designate the following nar	ned political co	mmittee as	my Principal	Campaign Comm	nittee for the 2022 (year of elec	election(s).	
	NOTE: This designation should be f	iled with the ap	propriate of	fice listed in	the instructions.			
	(a) Name of Committee (in full) DAVIDSON FOR CONGRESS							
	(b) Address (number and street) PO Box 518							
	(c) City, State, and ZIP Code							
	Troy				ОН	45373-0518		
	DE				THORIZED	COMMITTEES es)		
8.	I hereby authorize the following name candidacy.	ned committee	, which is NC	OT my princi	oal campaign com	nmittee, to receive and exp	pend funds on behalf of	my
	NOTE: This designation should be f	iled with the pr	incipal camp	aign commit	tee.			
	(a) Name of Committee (in full)	ınd						
	Davidson Victory Fu	ina						
	(b) Address (number and street) 499 S Capitol St SW							
	407							
	(c) City, State, and ZIP Code							
	Washington				DC	20003-4013		
	I certify that I have exa	mined this Sta	tement and t	o the best o	^c my knowledge a	nd belief it is true, correct	and complete.	'
Si	gnature of Candidate					Date		-
Da	AVIDSON, WARREN, , ,			[Ele	ctronically Filed]	03/27/2022		
NC	OTE: Submission of false, erroneous,	or incomplete	information	may subject	the person signin	ng this Statement to penal	ies 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)
3.	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)
	FREEDOMWORKS PAC 2019
	(b) Address (number and street) PO BOX 75760
	(c) City, State, and ZIP Code
	WASHINGTON DC 20013
3.	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)
	FREEDOMWORKS VICTORY 2022
	(b) Address (number and street) PO BOX 26141
	(c) City, State, and ZIP Code
	ALEXANDRIA VA 22313
3.	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
3.	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