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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							<u></u>	
	Goodrich, Charles, , , (b) Address (number and street)					2. Candidate's FEC Identification Number			
	6842 Harbour Woods Overlook				H4IN05179				
	(c) City, State, and ZIP Code Noblesville		IN	4606	2		ew N) OR	X (A)	
4.	Party Affiliation	5. Office Sought				rict of Candidate	i) Oit	(A)	
	REPUBLICAN PARTY	House			IN	05			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full)								
GO WITH CHUCK GOODRICH, INC.									
(b) Address (number and street)									
	6842 HARBOUR WOODS OVERLOOK								
	(c) City, State, and ZIP Code								
	NOBLESVILLE				IN	46062			
	DE	SIGNATION	OF OTH	IEB VII	THORIZED	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)									
BATTLEFIELD FUND 2023									
(b) Address (number and street)									
	228 S WASHINGTON ST STE	115							
	(c) City, State, and ZIP Code								
	ALEXANDRIA				VA	22314			
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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			
G	oodrich, Charles, , ,					11/10/2023			
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)