

Image# 202208079525136478

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Chavez-DeRemer, Lori, , ,		
(b) Address (number and street) 11805 SE Eastbourne Lane		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Happy Valley		OR 97086
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate OR 05
2. Candidate's FEC Identification Number H2OR05209		
3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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) Lori Chavez-DeRemer for Congress		
(b) Address (number and street) 11805 SE Eastbourne Lane		
(c) City, State, and ZIP Code Happy Valley		
OR 97086		

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) CHAVEZ-DEREMER SKARLATOS VICTORY 2022		
(b) Address (number and street) PO BOX 23696		
(c) City, State, and ZIP Code TIGARD		
OR 97281		

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 Chavez-DeRemer, Lori, , , [Electronically Filed]	Date 08/07/2022
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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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Optional Supplemental Page for Designation
of Additional Authorized CommitteesPage 2 of 3

FEC Form 2S (Revised 02/2017)

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)

TAKE BACK OR-05 REPUBLICAN NOMINEE FUND 2022

(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. **NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

LORI CHAVEZ-DEREMER VICTORY

(b) Address (number and street)

PO BOX 23696

(c) City, State, and ZIP Code

TIGARD

OR

97281

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)

JERRY CARL CANDIDATE FUND

(b) Address (number and street)

PO BOX 852138

(c) City, State, and ZIP Code

MOBILE

AL

36685

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)

TAKE BACK THE HOUSE 2022

(b) Address (number and street)

PO BOX 30844

(c) City, State, and ZIP Code

BETHESDA

MD

20824

Optional Supplemental Page for Designation
of Additional Authorized CommitteesPage 3 of 3

FEC Form 2S (Revised 02/2017)

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)

LORI CHAVEZ-DEREMER VICTORY

(b) Address (number and street)

PO BOX 23696

(c) City, State, and ZIP Code

TIGARD

OR

97281

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)

JERRY CARL CANDIDATE FUND

(b) Address (number and street)

PO BOX 852138

(c) City, State, and ZIP Code

MOBILE

AL

36685

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)

NRCC OREGON VICTORY

(b) Address (number and street)

320 1ST STREET, SE

(c) City, State, and ZIP Code

WASHINGTON

DC

20003

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