

Image# 202110279468371483

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Mapp, Chris, , ,		2. Candidate's FEC Identification Number H8TX27080
(b) Address (number and street) <input type="checkbox"/> Check if address changed 1808 W Adams Ave		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code Port O'Connor TX 77982		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate TX 27

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) MAPP FOR CONGRESS		
(b) Address (number and street) 1808 W. ADAMS P.O. BOX 301		
(c) City, State, and ZIP Code PORT O'CONNOR TX 77982		

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)		
(b) Address (number and street)		
(c) City, State, and ZIP Code		

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 Mapp, Chris, , , <i>[Electronically Filed]</i>	Date 10/27/2021
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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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