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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Bentz, Cliff, , ,			2. Candidate's FEC Identification Number H0OR02127	
(b) Address (number and street) 660 Morgan Avenue		<input checked="" type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Ontario		3. Is This Statement <input type="checkbox"/> New (N) <b>OR</b> <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate OR 02		

### 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) CLIFF BENTZ FOR CONGRESS		
(b) Address (number and street) 89 SW THIRD AVE		
(c) City, State, and ZIP Code ONTARIO OR 97914		

### 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) GT FARM TEAM III		
(b) Address (number and street) PO BOX 30844 SUITE 401		
(c) City, State, and ZIP Code BETHESDA MD 20824		

*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 Bentz, Cliff, , ,  [Electronically Filed]	Date 01/04/2021
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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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