## FEC FORM 2 STATEMENT OF CANDIDACY

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1.	(a) Name of Candidate (in full)							
	Feenstra, Randall, , ,							
	(b) Address (number and street) 641 2nd St	□C	heck if addre	ess change	d	2. Candidate's FEC Identified H0IA04145	cation Number	
	(c) City, State, and ZIP Code					3. Is This New	Amended	
	Hull		IA	512	39-7323	Statement (N)	OR X (A)	
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	rict of Candidate		
	REPUBLICAN PARTY	House			IA	04		
	DI	ESIGNATIO	N OF PR	INCIPA				
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election(s).							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full) FEENSTRA FOR CONGRESS							
	(b) Address (number and street) 641 2nd St							
	(c) City, State, and ZIP Code							
	Hull				IA	51239-7323		
<ul> <li><b>DESIGNATION OF OTHER AUTHORIZED COMMITTEES</b> <ul> <li>(Including Joint Fundraising Representatives)</li> </ul> </li> <li>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.</li> </ul>								
	NOTE: This designation should be	filed with the pri	ncipal campa	aign commi	ttee.			
	(a) Name of Committee (in full) GT Farm Team III							
	(b) Address (number and street) PO Box 30844							
	(c) City, State, and ZIP Code							
	Bethesda				MD	20824-0844		
	I certify that I have ex	amined this Stat	ement and to	o the best c	of my knowledge a	nd belief it is true, correct and	d complete.	
Si	gnature of Candidate					Date		
Fe	eenstra, Randall, , ,			[Ele	ctronically Filed]	01/28/2021		
N	OTE: Submission of false, erroneous	, or incomplete	information r	may subjec	t the person signir	ng this Statement to penalties	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

## 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)			
Feenstra Victory Fund			
(b) Address (number and street) 641 2nd Street			
(c) City, State, and ZIP Code		54000	
Hull	IA	51239	

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.

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

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)	
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(b) Address (number and street)

(a) Name of Committee (in full)

(c) City, State, and ZIP Code

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