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## FEC FORM 2

## STATEMENT OF CANDIDACY

_	(=) None of Oscalidate (in full)									
1.	(a) Name of Candidate (in full)									
	Roy, Chip, , ,									
	(b) Address (number and street) 6705 W. Hwy 290 Suite 50295	☐ Check if address changed				Candidate's FEC Identification Number     H8TX21307				
	(c) City, State, and ZIP Code						mended			
	AUSTIN		T)	X 7873	35	Statement (N) OR (A)	A)			
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	rict of Candidate				
	REPUBLICAN PARTY	House			TX	21				
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	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 f	iled with the ap	propriate off	ice listed in	he instructions.					
	(a) Name of Committee (in full)									
	Chip Roy for Congre	ess								
	(b) Address (number and street)									
	6705 W. Hwy 290									
	Suite 50295									
	(c) City, State, and ZIP Code									
	Austin				TX	78735				
	Austin				17.	70700				
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 THE HOUSE 2022										
	THE BROKE THE	.0002 20	,							
	(b) Address (number and street) PO BOX 30844									
	(c) City, State, and ZIP Code									
	BETHESDA				MD	20824-0844				
	521112657				·····B	2002 1 00 1 1				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.										
Si	gnature of Candidate					Date				
Re	oy, Chip, , ,			[Elec	tronically Filed]	05/05/2023				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										
_				,,	,	1				

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.								
	(a) Name of Committee (in full)								
	Take Back the House Texas 2022								
	(b) Address (number and street) PO Box 30844								
	(c) City, State, and ZIP Code								
	Bethesda	MD	20824						
3.	I hereby authorize the following named committee, which is NOT my prin candidacy. <b>NOTE</b> : This designation should be filed with the principal care		my						
	(a) Name of Committee (in full)								
	FREEDOMWORKS VICTORY 2023								
	(b) Address (number and street) PO BOX 26141								
	(c) City, State, and ZIP Code								
	ALEXANDRIA	VA	22313						
3.	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)								
	CHIP ROY VICTORY FUND								
	(b) Address (number and street) 6705 W. HWY 290 SUITE 50295								
	(c) City, State, and ZIP Code								
	AUSTIN	TX	78735						
3.	I hereby authorize the following named committee, which is NOT my prin candidacy. <b>NOTE</b> : This designation should be filed with the principal care			my					
	(a) Name of Committee (in full)								
	(b) Address (number and street)								
	(c) City, State, and ZIP Code								