FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Chabot, Steve, , ,								
	(b) Address (number and street) 3025 Daytona Ave.	☐ Check if address changed			d	Candidate's FEC Identification Number H8OH01043			
	(c) City, State, and ZIP Code					3. Is This New Amend	ded		
	Cincinnati		0)H 452	11-7026	Statement (N) OR (A)			
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	rict of Candidate			
	REPUBLICAN PARTY	House			ОН	01			
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)								
	NOTE: This designation should be f	iled with the ap	propriate of	fice listed in	the instructions.				
	(a) Name of Committee (in full) STEVE CHABOT FO	OR CON	GRESS						
	(b) Address (number and street) 9856 ARCHER LN								
	(c) City, State, and ZIP Code								
	DUBLIN				ОН	43017-8914			
	DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)								
8.	I hereby authorize the following name candidacy.	ned committee,	which is NO	OT my princ	ipal campaign con	nmittee, to receive and expend funds on behalf of m	ny		
	NOTE: This designation should be f	iled with the pri	ncipal camp	aign comm	ittee.				
	(a) Name of Committee (in full) TAKE BACK THE H	OUSE 20)22						
	(b) Address (number and street) PO BOX 30844								
	(c) City, State, and ZIP Code								
	BETHESDA				MD	20824-0844			
	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			
Cl	habot, Steve, , ,			[Eld	ectronically Filed]	10/20/2021			
NC	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing 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

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

	(including Joint Fundralsing 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)
	2022 PHASE 1 PATRIOT DAY JFC
	(b) Address (number and street) 228 S. WASHINGTON STREET SUITE 115
	(c) City, State, and ZIP Code
	ALEXANDRIA VA 22314
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
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
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)
	(a) City State and 7IP Code
	(c) City, State, and ZIP Code