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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	TORRES, ANN MARIE, , , (b) Address (number and street)	☐ Check if address changed				2. Candidate's FEC Identification Number			
	434 WEST SAGE ROAD	a chook ii address changed				H4TX34028			
	(c) City, State, and ZIP Code	·					lew	Amended	
	KINGSVILLE	F Office Cours	T)	7836		,	N) OR	(A)	
4.	Party Affiliation REPUBLICAN PARTY	5. Office Soug House	gnt		TX	trict of Candidate 34			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2023 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full)								
ANN MARIE TORRES FOR CONGRESS									
	(b) Address (number and street)								
	434 WEST SAGE ROAD								
	(c) City, State, and ZIP Code								
	KINGSVILLE				TX	78363			
_									
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									
(6) Oity, State, and AIF Gode									
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						Date			
T	orres, Ann Marie, NMN, ,	09/23/2023							
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)