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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Strickler, Robert, J, ,		
(b) Address (number and street) 2799 Red Gate Drive		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Doylestown PA 18902		2. Candidate's FEC Identification Number H6PA01207
4. Party Affiliation DEMOCRATIC PARTY		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
5. Office Sought House		6. State & District of Candidate PA 01

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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) Rob Strickler for Congress		
(b) Address (number and street) PO Box 102		
(c) City, State, and ZIP Code Buckingham PA 18912		

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		

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 Strickler, Robert, , ,	Date 09/07/2025
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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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