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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Fallon, Patrick, , ,		
(b) Address (number and street) PO Box 1445		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code FRISCO TX 75034		2. Candidate's FEC Identification Number H0TX04219
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House
6. State & District of Candidate TX 04		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)

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) FALLON FOR CONGRESS		
(b) Address (number and street) PO BOX 1445		
(c) City, State, and ZIP Code FRISCO TX 75034		

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) FALLON VICTORY FUND		
(b) Address (number and street) 824 S MILLEDGE AVE STE 101		
(c) City, State, and ZIP Code ATHENS GA 30605		

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 Fallon, Patrick, , ,	Date 12/03/2025
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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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