

Image# 201907099150529702

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Stivers, Steve, , Mr.,		
(b) Address (number and street) 1971 Concord Road		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Columbus OH 43212-1947		2. Candidate's FEC Identification Number H8OH15076
4. Party Affiliation REPUBLICAN PARTY		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
5. Office Sought House	6. State & District of Candidate OH 15	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) Stivers For Congress		
(b) Address (number and street) 4679 Winterset Dr		
(c) City, State, and ZIP Code Columbus OH 43220-8113		

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) Stivers Victory Committee		
(b) Address (number and street) 4679 Winterset Dr		
(c) City, State, and ZIP Code Columbus OH 43220-8113		

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 Stivers, Steve, , Mr., [Electronically Filed]	Date 07/09/2019
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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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Optional Supplemental Page for Designation
of Additional Authorized CommitteesPage 2 of 2

FEC Form 2S (Revised 02/2017)

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)

Financial Innovation Committee

(b) Address (number and street)

228 S Washington St
Ste 115

(c) City, State, and ZIP Code

Alexandria

VA

22314-5404

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)

The Rivalry Joint Committee

(b) Address (number and street)

228 S Washington St

(c) City, State, and ZIP Code

Alexandria

VA

22314-5408

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