

Image# 202606089870439709

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Gallrein, Ed, , ,			2. Candidate's FEC Identification Number H6KY04171	
(b) Address (number and street) PO Box 1059		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Shelbyville KY 40066		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate KY 04		

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) Gallrein for Congress		
(b) Address (number and street) PO Box 1059		
(c) City, State, and ZIP Code Shelbyville KY 40066		

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) GALLREIN 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 Gallrein, Ed, , ,	Date 06/08/2026
---	--------------------

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--	--