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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	Deering, Regan, , ,										
	(b) Address (number and street) PO Box 343		☐ Check if address changed				2. Candidate's FEC Identification Number H2IL13179				
	(c) City, State, and ZIP Code	ity, State, and ZIP Code				3. Is This		ew		Amended	
	Decatur	IL 62525			Staten	nent X (N	l) OR		(A)		
4.	Party Affiliation	5. Office Soug	ght		6. State & Dis		date				
	REPUBLICAN PARTY	House			IL	13					
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)										
	Regan4Congress										
	(b) Address (number and street) PO Box 343										
	(c) City, State, and ZIP Code										
	Decatur				IL	62525	5				
		DECICNATIO	N OF OT	UED AIII	TUODIZED	COMMIT	TEEC				
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)											
(a) City State and ZID Code											
(c) City, State, and ZIP Code											
	Loortify that I have	avaminad this Cta	40m20m4 am d 4a	the best of		and haliaf it is		and same	lata		
	I certify that I have o	examined this Sta	ternent and to	ine best of t	тіу кпоміваде а	and belief it is	true, correct	апа сотгр	iete.		
Si	Signature of Candidate					Date	Date				
$D\epsilon$	eering, Regan, , ,		[Electronically Filed]			01/25/2022					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											
_	TIE: Submission of false, erroned	ius, or incomplete			ne person signi	ing this State		1163 01 2 0.	S.C. 943	7g.	
	TE: Submission of faise, erroried	us, or incomplete		nay subject to	le persori signi	IIIg tills Statel	none to penal	1103 01 2 0.	S.C. §43	7g.	
	JIE: Submission of false, erroried	ids, of incomplete		may subject to	le person signi	IIIg tills State	nem to penal	1103 01 2 0.	S.C. 943	7g.	

FEC FORM 2 (REV. 02/2009)