Image# 202409239684692755 PAGE 1 / 3

FEC FORM 2

STATEMENT OF CANDIDACY

_											
1.	(a) Name of Candidate (in ful Anderson, Derrick, , ,	I)									
	(b) Address (number and stre	ot)	ПС	heck if addre	es changed		2 Candida	ata's FEC Idan	tification	Numb	ner .
	PO Box 330	<i>(</i>)		neck ii addie	ss changed		2. Candidate's FEC Identification Number H2VA07170				
	(c) City, State, and ZIP Code Fredericksburg			VA	2240	1	3. Is Thi				Amended (A)
4.	Party Affiliation	5	5. Office Soug		2240	6. State & Dis) OK		(^)
4.	REPUBLICAN PARTY		House	int		VA	07	uale			
		DES	SIGNATIO	N OF PR	INCIPAL	CAMPAIG	N COMM	ITTEE			
7.	I hereby designate the following	ing name	ed political co	mmittee as m	ny Principal (Campaign Com	mittee for the	year of elec		ction(s).
	NOTE: This designation shou		ed with the ap	propriate offi	ce listed in th	ne instructions.					
	(a) Name of Committee (in fu	II)									
	Derrick Anderso	n for	VA, Inc.								
	(b) Address (number and stre	et)									
	PO Box 330										
	(c) City, State, and ZIP Code										
	Fredericksburg					VA	22404	4			
			(Including Joir	t Fundraisin	THORIZED g Representativ	/es)				
8.	I hereby authorize the following candidacy.	ng name	ed committee,	which is NO	T my principa	al campaign co	mmittee, to re	eceive and exp	end fund	ds on I	behalf of my
	NOTE: This designation shou	ıld be file	ed with the pri	ncipal campa	ign committe	ee.					
	(a) Name of Committee (in fu	II)									
	Scalise Leaders	ship F	und 202	24							
	(b) Address (number and stre	eet)									
	320 1st St SE										
	(c) City, State, and ZIP Code										
	Washington					DC	20003	\$			
	I certify that I ha	ve exam	ined this Stat	tement and to	the best of i	my knowledge a	and belief it is	s true, correct	and com	plete.	
Signature of Candidate Date											
Anderson, Derrick, , , 09/23/2024											
NC	OTE: Submission of false, erro	neous, c	or incomplete	information n	nay subject t	ne person signi	ng this State	ment to penalt	ies of 2 l	J.S.C.	§437g.
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FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	² of	3	
Page	OI		

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)							
	Grow the Majority							
	(b) Address (number and street)							
	228 South Washington St							
	Ste. 115 (c) City, State, and ZIP Code							
	Alexandria	VA	22314					
8.	I hereby authorize the following named committee, which is NOT my princi candidacy. NOTE : This designation should be filed with the principal camp							
	(a) Name of Committee (in full)							
	War Veterans Fund 2024							
	(b) Address (number and street) PO Box 26141							
	(c) City, State, and ZIP Code							
	Alexandria	VA	22313					
8.	I hereby authorize the following named committee, which is NOT my princi candidacy. NOTE: This designation should be filed with the principal camp (a) Name of Committee (in full) NRCC Victory 2024							
	(b) Address (number and street) 320 First Street SE							
	(c) City, State, and ZIP Code							
	Washington	DC	20003					
8.	I hereby authorize the following named committee, which is NOT my princi candidacy. NOTE : This designation should be filed with the principal camp							
	(a) Name of Committee (in full)							
	Derrick Anderson Victory Fund							
	(b) Address (number and street) PO Box 330							
	(c) City, State, and ZIP Code							
	Fredericksburg	VA	22404					

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	³ of	3	
Page	01		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) GT Farm Team 2024 (b) Address (number and street) PO Box 30844 (c) City, State, and ZIP Code Bethesda MD 20824 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expendential 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.
(b) Address (number and street) 228 South Washington St Ste. 115 (c) City, State, and ZIP Code Alexandria 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expendandicacy, NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) GT Farm Team 2024 (b) Address (number and street) PO Box 30844 (c) City, State, and ZIP Code Bethesda MD 20824 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expendandicacy, 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 expendandicacy. NOTE: This designation should be filed with the principal campaign committee, to receive and expendandicacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)		(a) Name of Committee (in full)
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	8.	
(c) City, State, and ZIP Code		(b) Address (number and street)
		(c) City, State, and ZIP Code