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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Shreve, Jefferson, , ,		
(b) Address (number and street) PO Box 17182		<input checked="" type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Southport IN 46227		2. Candidate's FEC Identification Number H4IN06185
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House
6. State & District of Candidate IN 06		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) SHREVE FOR CONGRESS		
(b) Address (number and street) PO BOX 17182		
(c) City, State, and ZIP Code SOUTHPORT IN 46227		

### 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) TEAM SHREVE		
(b) Address (number and street) PO BOX 17182		
(c) City, State, and ZIP Code SOUTHPORT IN 46227		

*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 Shreve, Jefferson, , ,	Date 12/05/2024
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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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