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PAGE 1 / 2

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Foxx, Virginia, Ann, ,		2. Candidate's FEC Identification Number H4NC05146	
(b) Address (number and street) PO Box 2676		<input type="checkbox"/> Check if address changed	
(c) City, State, and ZIP Code Boone NC 28607		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 NC 5	

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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) Virginia Foxx for Congress	
(b) Address (number and street) PO Box 2676	
(c) City, State, and ZIP Code Boone NC 28607	

### 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)
(c) City, State, and ZIP Code

*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 Foxx, Virginia, Ann, ,  [Electronically Filed]	Date 03/01/2022
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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 Committees

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)

Foxx Victory Federal Committee

(b) Address (number and street)

1909 K Street, NW  
12th Floor

(c) City, State, and ZIP Code

Washington DC 20006

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)

STRENGTHENING TRANSPORTATION EDUCATION AND DEVELOPMENT IN YOUTH JOINT FUNDRAISING COMMITTEE  
(STEADY JFC)

(b) Address (number and street)

1909 K Street, NW  
12th Floor

(c) City, State, and ZIP Code

Washington DC 20006

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