

Image# 202404169633423789

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) DOWNING, TROY, , ,			2. Candidate's FEC Identification Number H4MT02098	
(b) Address (number and street) PO BOX 322		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code HELENA MT 59624		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 MT 02		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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) TROY DOWNING FOR CONGRESS		
(b) Address (number and street) PO BOX 322		
(c) City, State, and ZIP Code HELENA MT 59624		

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) WAR VETERANS FUND 2024		
(b) Address (number and street) PO BOX 26141		
(c) City, State, and ZIP Code ALEXANDRIA VA 22313		

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 DOWNING, TROY, , ,	Date 04/16/2024
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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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