

Image# 202411139719969826

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) GOODEN, LANCE, , ,			2. Candidate's FEC Identification Number H8TX05144	
(b) Address (number and street) PO BOX 2125		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code TERRELL TX 75160		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 TX 05		

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) LANCE GOODEN FOR CONGRESS COMMITTEE		
(b) Address (number and street) PO BOX 2125		
(c) City, State, and ZIP Code TERRELL TX 75160		

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) GOODEN VICTORY FUND		
(b) Address (number and street) 75 S HIGH ST STE. 4		
(c) City, State, and ZIP Code DUBLIN OH 43017		

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 GOODEN, LANCE, , ,	Date 11/13/2024
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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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Optional Supplemental Page for Designation
of Additional Authorized CommitteesPage 2 of 2

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)

FOUNDING FATHERS VICTORY FUND

(b) Address (number and street)

C/O RED CURVE SOLUTIONS
138 CONANT ST, 2ND FL

(c) City, State, and ZIP Code

BEVERLY

MA

01915

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.

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(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