

Image# 202109099466636864

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) VAN DUYNE, ELIZABETH, ANN, ,		2. Candidate's FEC Identification Number H0TX24209
(b) Address (number and street) <input type="checkbox"/> Check if address changed PO BOX 630167		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code IRVING TX 75063		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate TX 24

### 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) BETH VAN DUYNE FOR CONGRESS		
(b) Address (number and street) PO BOX 630167		
(c) City, State, and ZIP Code IRVING TX 75063		

### 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) BETH VICTORY FUND		
(b) Address (number and street) PO BOX 630167		
(c) City, State, and ZIP Code IRVING TX 75063		

*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 VAN DUYNE, ELIZABETH, ANN, ,  <i>[Electronically Filed]</i>	Date 09/09/2021
---------------------------------------------------------------------------------------------	--------------------

**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--

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)

TEXAS RELOADED

(b) Address (number and street)

5900 MEMORIAL DR STE 215

(c) City, State, and ZIP Code

HOUSTON

TX

77007

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)

TAKE BACK THE HOUSE 2022

(b) Address (number and street)

PO BOX 30844

(c) City, State, and ZIP Code

BETHESDA

MD

20824-0844

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)

Take Back the House Texas 2022

(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 expend funds on behalf of my candidacy. **NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

GOP WINNING WOMEN

(b) Address (number and street)

228 S. WASHINGTON ST.

STE. 115

(c) City, State, and ZIP Code

ALEXANDRIA

VA

22314

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)

VAN DUYNE KIM VICTORY FUND

(b) Address (number and street)

P.O. BOX 341027

(c) City, State, and ZIP Code

AUSTIN

TX

78734

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)

IRON LADIES PAC

(b) Address (number and street)

PO BOX 341027

(c) City, State, and ZIP Code

AUSTIN

TX

78734

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)

TENNEY VAN DUYNE VICTORY FUND

(b) Address (number and street)

PO BOX 341027

(c) City, State, and ZIP Code

AUSTIN

TX

78734

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)

VAN DUYNE MILLER-MEEKS PAC

(b) Address (number and street)

PO BOX 341027

(c) City, State, and ZIP Code

AUSTIN

TX

78734

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)

2022 PHASE 1 PATRIOT DAY JFC

(b) Address (number and street)

228 S. WASHINGTON STREET  
SUITE 115

(c) City, State, and ZIP Code

ALEXANDRIA VA 22314

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

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