

Image# 202111299469525864

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) GAVARONE, THERESA, , ,		2. Candidate's FEC Identification Number H2OH09171
(b) Address (number and street) <input type="checkbox"/> Check if address changed 417 KIWANIS AVE		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code HURON OH 44839		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate OH 09

### 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) THERESA GAVARONE FOR CONGRESS		
(b) Address (number and street) 4679 WINTERSET DRIVE		
(c) City, State, and ZIP Code COLUMBUS OH 43220		

### 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 GAVARONE, THERESA, , ,  <i>[Electronically Filed]</i>	Date 11/29/2021
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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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