## FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 3

1.	(a) Name of Candidate (in full)					
	Houlahan, Chrissy, , ,					
	(b) Address (number and street) PO Box 222	Check if	address changed		2. Candidate's FEC Identi H8PA06087	fication Number
	(c) City, State, and ZIP Code				3. Is This New	
	Devon		PA 1933	33	Statement (N)	OR X (A)
4.	Party Affiliation	5. Office Sought		6. State & Dist	rict of Candidate	
	DEMOCRATIC PARTY	House		PA	06	
	DE	SIGNATION O	F PRINCIPAL	. CAMPAIGN		
7.	I hereby designate the following nar	ned political committe	e as my Principal	Campaign Comn	hittee for the 2022 (year of election	election(s). on)
	NOTE: This designation should be f	iled with the appropria	ate office listed in	the instructions.		
	(a) Name of Committee (in full) CHRISSY HOULAH	AN FOR COM	NGRESS			
	(b) Address (number and street) PO Box 222					
	(c) City, State, and ZIP Code					
	Devon			PA	19333	
	I hereby authorize the following nan candidacy.	ned committee, which		bal campaign con		nd funds on behalf of my
	(a) Name of Committee (in full)					
	Serve America Victo	ory Fund				
	(b) Address (number and street) PO BOX 2013					
	(c) City, State, and ZIP Code					
	Salem			MA	01970	
	I certify that I have exa	mined this Statement	and to the best of	<sup>t</sup> my knowledge a	nd belief it is true, correct ar	nd complete.
Sig	gnature of Candidate				Date	
Ho	pulahan, Chrissy, , ,		[Elec	ctronically Filed]	03/15/2021	
NO	TE: Submission of false, erroneous	or incomplete inform	ation may subject	the person signir	g this Statement to penaltie	s of 2 U.S.C. §437g.
	I	ı I	1	I	1	FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

## 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)		
HOULAHAN VICTORY FUND		
(b) Address (number and street) 918 PENNSYLVANIA AVENUE SE		
(c) City, State, and ZIP Code Washington	DC	20003

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)			
FAB FOUR PAC			
(b) Address (number and street) 231 N. 3RD STREET			
SUITE 406			
(c) City, State, and ZIP Code			
Philadelphia	PA	19106	

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)		
Service First Women's Victory Fund		
· · · · · · · · · · · · · · · · · · ·		
(b) Address (number and street) PO Box 9		
(c) City, State, and ZIP Code		
Lexington	KY	40588

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)		
Second Service Victory Fund		
(b) Address (number and street)		
2910 E Gary Way		
(c) City, State, and ZIP Code		
Phoenix	AZ	85042

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

## 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)		
MEECA Victory Fund		
(b) Address (number and street) 910 17Th St NW Ste 925		
(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)		
VoteVets 2022 Victory Fund		
(b) Address (number and street) PO Box 11293		
(c) City, State, and ZIP Code		
Portland	OR	97211

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.

Name of Committee (in full)
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