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## FEC FORM 2

## STATEMENT OF CANDIDACY

_	( ) NI								
1.	(a) Name of Candidate (in full)								
	Steube, Greg, , ,								
	(b) Address (number and street) 5317 Fruitville Rd 102	☐ Check if address changed				Candidate's FEC Identification Number     H8FL17053			
	(c) City, State, and ZIP Code					3. Is This New Amended			
	Sarasota		Fl	_ 3423	2	Statement (N) OR (A)			
4.	Party Affiliation	5. Office Soug	ght		6. State & Dist	trict of Candidate			
	REPUBLICAN PARTY	House			FL	17			
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	I hereby designate the following nar	med political co	ommittee as n	ny Principal	Campaign Comr	mittee for the $\frac{2022}{\text{(year of election)}}$ election(s).			
	NOTE: This designation should be f (a) Name of Committee (in full)	iled with the ap	opropriate offi	ce listed in t	he instructions.				
	( )								
	Greg Steube for Co	ngress							
	(b) Address (number and street)								
	5317 Fruitville Rd								
	#102								
	(c) City, State, and ZIP Code								
	Sarasota				FL	34232			
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)  Greg Steube for Co	ngress							
	(b) Address (number and street) 5317 Fruitville Rd								
	#102								
	(c) City, State, and ZIP Code								
	Sarasota				FL	34232			
	Caracota					0.1202			
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.									
Si	gnature of Candidate					Date			
Sto	eube, Greg, , ,			[Elec	tronically Filed]	11/16/2020			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									
			1	1					

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

3.	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)  Greg Steube Victory Fund							
	(b) Address (number and street) 499 South Captiol Street SW #407							
	(c) City, State, and ZIP Code							
	Washington	DC	20003					
3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	Greg Steube Victory Fund							
	(b) Address (number and street) 499 S Capitol St SW							
	Ste 407							
	(c) City, State, and ZIP Code							
	Washington	DC	20003-4016					
3.	. I hereby authorize the following named committee, which is NOT my princip candidacy. <b>NOTE</b> : This designation should be filed with the principal campa (a) Name of Committee (in full)		mmittee, to receive and expend funds on behalf of my					
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : 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							