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### FEC FORM 2

#### STATEMENT OF CANDIDACY

_						
1.	(a) Name of Candidate (in full)					
	Schweikert, David, S., ,					
	(b) Address (number and street) 8175 E Evans Rd #13176	□С	heck if addre	ss changed		2. Candidate's FEC Identification Number H4AZ06045
	(c) City, State, and ZIP Code					3. Is This New Amended
	Scottsdale		AZ	2 8526	7	Statement (N) OR (A)
4.	Party Affiliation	5. Office Soug	ıht		6. State & Dist	trict of Candidate
	REPUBLICAN PARTY	House			AZ	01
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIGI	N COMMITTEE
7.	I hereby designate the following nar	med political co	mmittee as n	ny Principal	Campaign Comr	mittee for the $\frac{2026}{\text{(year of election)}}$ election(s).
	NOTE: This designation should be filed with the appropriate office listed in the instructions.					
	(a) Name of Committee (in full)					
	FRIENDS OF DAVI	O SCHWE	IKERT			
	(b) Address (number and street)					
	8175 EAST EVANS ROAD					
	# 13176 (c) City, State, and ZIP Code					
	SCOTTSDALE				AZ	85267
	0001102/122					
8.	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)					
	SCHWEIKERT VICTORY COMMITTEE					
	(b) Address (number and street)					
	PO Box 30844					
	(c) City, State, and ZIP Code					
	Bethesda				MD	20824-0844
	I certify that I have exa	mined this Stat	tement and to	the best of	my knowledge a	and belief it is true, correct and complete.
Si	gnature of Candidate					Date
So	chweikert, David, S., ,					11/25/2024
NC	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.					

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)

8.	nereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	FREEDOMWORKS VICTORY 2023					
	(b) Address (number and street)					
	PO BOX 26141					
	(c) City, State, and ZIP Code					
	ALEXANDRIA	VA	22313			
8.	I hereby authorize the following named committee, which is NOT my princi candidacy. <b>NOTE</b> : This designation should be filed with the principal camp					
	(a) Name of Committee (in full)					
	SCALISE LEADERSHIP FUND 2024					
	(b) Address (number and street) 320 1ST ST SE					
	(c) City, State, and ZIP Code					
	WASHINGTON	DC	20003			
8.	I hereby authorize the following named committee, which is NOT my princi candidacy. NOTE: This designation should be filed with the principal camp (a) Name of Committee (in full)  AMERICAN BATTLEGROUND FUND					
	(b) Address (number and street) PO BOX 30844					
	(c) City, State, and ZIP Code					
	BETHESDA	MD	20824			
8.	ereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my didacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	EMMER MAJORITY BUILDERS					
	(b) Address (number and street) 824 S. MILLEDGE AVE. STE. 101					
	(c) City, State, and ZIP Code					
	ATHENS	GA	30605			

FEC Form 2S (Revised 02/2017)

# Optional Supplemental Page for Designation of Additional Authorized Committees

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#### **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**

(	Includina Jo	int Fundrais	sina Rer	oresentatives)

	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)						
GROW THE MAJORITY						
(b) Address (number and street)  228 S Washington St  Ste 115						
(c) City, State, and ZIP Code						
Alexandria	VA	22314				
	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)						
SCOTT FRANKLIN WING	MAN FUND					
(b) Address (number and street) P.O. BOX 2811						
(c) City, State, and ZIP Code						
LAKELAND	FL	33806				
8. I hereby authorize the following named co candidacy. NOTE: This designation shoul  (a) Name of Committee (in full)  PROTECT THE HOUSE 2  (b) Address (number and street)	be filed with the principal campaign com	=	expend funds on behalf of my			
PO BOX 30844						
(c) City, State, and ZIP Code						
BETHESDA	MD	20824				
I hereby authorize the following named co candidacy. <b>NOTE</b> : This designation shoul		-	expend funds on behalf of my			
(a) Name of Committee (in full)						
ARIZONA VICTORY FUN	D 2024					
(b) Address (number and street) 320 1ST STREET, SE						