FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full)							
Oberweis, Jim, , ,							
(b) Address (number and street) 3 Buckingham Dr				2. Candidate's FEC Identification Number H8IL14083			
(c) City, State, and ZIP Code				3. Is This	Ne	W	Amended
Sugar Grove			4	Statement (N) OR X (A)			× (A)
4. Party Affiliation	5. Office Sought		6. State & Dist	rict of Candid	late		
Rep	House		IL	14			
DE	SIGNATION OF PR		CAMPAIGN		TTEE		
7. I hereby designate the following nan	ned political committee as r	my Principal (Campaign Comn	nittee for the	2020 (year of elect	election	n(s).
NOTE: This designation should be fi	led with the appropriate off	ice listed in t	he instructions.				
(a) Name of Committee (in full) Jim 2020 Committee)						
(b) Address (number and street) 3 Buckingham Dr							
(c) City, State, and ZIP Code							
Sugar Grove			IL	60554			
candidacy. NOTE: This designation should be fi (a) Name of Committee (in full)	led with the principal camp	aign committ	ee.				
Jim 2020 Committee	9						
(b) Address (number and street) 3 Buckingham Dr							
(c) City, State, and ZIP Code							
Sugar Grove			IL	60554			
I certify that I have example	mined this Statement and to	o the best of	my knowledge a	nd belief it is	true, correct a	and complet	'e.
Signature of Candidate				Date			
Oberweis, Jim, , ,		[Elec	tronically Filed]	05/08/202	20		
NOTE: Submission of false, erroneous,	or incomplete information	may subject t	he person signin	ng this Staten	nent to penalt	ies 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

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)		
Oberweis for IL-14		
(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)					
Take Back the House 2020					
(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)		
Oberweis Victory Committee		
, 		
(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)			

(b) Address (number and street)

(c) City, State, and ZIP Code