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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Wiggins, Christopher, Brice, ,		
(b) Address (number and street) P.O. Box 1611		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Ocean Springs		2. Candidate's FEC Identification Number H2MS04308
4. Party Affiliation REPUBLICAN PARTY		3. Is This Statement <input checked="" type="checkbox"/> New (N) <input type="checkbox"/> OR <input type="checkbox"/> Amended (A)
MS	39566	6. State & District of Candidate MS 04
5. Office Sought House	6. State & District of Candidate MS 04	

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)

Brice Wiggins for Congress

(b) Address (number and street)

P.O. Box 1611

(c) City, State, and ZIP Code

Ocean Springs

MS 39566

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 Wiggins, Christopher, Brice, ,	Date 10/24/2021
<i>[Electronically Filed]</i>	

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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