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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) McHenry, Patrick Timothy, , ,		2. Candidate's FEC Identification Number H4NC10047	
(b) Address (number and street) 7918 Norman Court		<input type="checkbox"/> Check if address changed	
(c) City, State, and ZIP Code Denver NC 28037-8018		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)	
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate NC 10	

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) McHenry for Congress	
(b) Address (number and street) PO Box 2165	
(c) City, State, and ZIP Code Gastonia NC 28053-2165	

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) Team McHenry	
(b) Address (number and street) 228 S Washington St	
(c) City, State, and ZIP Code Alexandria VA 22314-5408	

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 McHenry, Patrick Timothy, , , <i>[Electronically Filed]</i>	Date 01/29/2021
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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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Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

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)

FINANCIAL INNOVATION COMMITTEE

(b) Address (number and street)

228 S. WASHINGTON ST.
STE. 115

(c) City, State, and ZIP Code

ALEXANDRIA VA 22314

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

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(b) Address (number and street)

(c) City, State, and ZIP Code