## FEC FORM 2 STATEMENT OF CANDIDACY

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| 1. (a) Name of Candidate (in full)<br>MCFARLIN, JEFF, , ,  |                                    |                 |   |                                       |                          |
|--|------------------------------------|-----------------|---|---------------------------------------|--------------------------|
| (b) Address (number and street)          □ Check if address changed         PO BOX 26141         □         □         Check if address changed         □         □         □ |                                    |                 | 2. Candidate's FEC Identification Number<br>H0TX23276 |                                       |                          |
| (c) City, State, and ZIP Code  |                                    |                 |   | 3. Is This New                        | Amended                  |
| ALEXANDRIA   |                                    |                 |   | Statement (N) OR                      |                          |
| 4. Party Affiliation   | 5. Office Sought                   |                 | 6. State & Distr                                      | ict of Candidate                      |                          |
| REPUBLICAN PARTY   | House                              |                 | ТХ  | 23                                    |                          |
| DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE  |                                    |                 |   |                                       |                          |
| <ol> <li>I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election(s). (year of election)</li> </ol>  |                                    |                 |   |                                       |                          |
| NOTE: This designation should be f   | iled with the appropriate official | ce listed in th | ne instructions.                                      |                                       |                          |
| (a) Name of Committee (in full)<br>MCFARLIN FOR CO   | ONGRESS                            |                 |   |                                       |                          |
| (b) Address (number and street)<br>PO BOX 26141  |                                    |                 |   |                                       |                          |
| (c) City, State, and ZIP Code  |                                    |                 |   |                                       |                          |
| ALEXANDRIA   |                                    |                 | VA  | 22313                                 |                          |
|  |                                    |                 |   |                                       |                          |
| <ul> <li>8. I hereby authorize the following nan candidacy.</li> <li>NOTE: This designation should be f</li> <li>(a) Name of Committee (in full)</li> <li>(b) Address (number and street)</li> </ul>   | ned committee, which is NO         | T my principa   |   |                                       | ds on behalf of my       |
|  |                                    |                 |   |                                       |                          |
| (c) City, State, and ZIP Code  |                                    |                 |   |                                       |                          |
| I certify that I have exa  | mined this Statement and to        | the best of i   | my knowledge al                                       | nd belief it is true, correct and com | olete.                   |
| Signature of Candidate   |                                    |                 |   | Date .                                |                          |
| MCFARLIN, JEFF, , ,  |                                    | [Elect          | ronically Filed]                                      | 11/13/2019                            |                          |
| NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.  |                                    |                 |   |                                       |                          |
|  |                                    |                 |   |                                       |                          |
|  |                                    |                 |   |                                       |                          |
|  | ı I                                |                 |   | ,, F                                  | EC FORM 2 (REV. 02/2009) |