FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full)					
Broun, Paul, C, , M.D.					
(b) Address (number and street) PO Box 6337	□ Check if address changed			2. Candidate's FEC Identification Number H2GA10125	
(c) City, State, and ZIP Code					lew Amended
Athens		GA 3060	4	Statement X (f	N) OR (A)
4. Party Affiliation	5. Office Sought		6. State & Distr	ict of Candidate	
REPUBLICAN PARTY	House		GA	10	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE					
 I hereby designate the following named political committee as my Principal Campaign Committee for the <u>2022</u> 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)					
Paul Broun for Cong	ress				
(b) Address (number and street) PO Box 6337					
(c) City, State, and ZIP Code					
Athens			GA	30604	
 8. I hereby authorize the following name candidacy. NOTE: This designation should be find (a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code 				imittee, to receive and ex	xpend funds on behalf of my
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				Date	
Broun, Paul, C, , M.D.		[Elect	tronically Filed]	03/31/2021	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.					