

Image# 201808299121536977

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Rothfus, Keith, , Mr.,		
(b) Address (number and street) PO Box 435		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Sewickley PA 15143		2. Candidate's FEC Identification Number HOPA04220
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House
		6. State & District of Candidate PA 17
3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) Rothfus for Congress		
(b) Address (number and street) PO Box 435		
(c) City, State, and ZIP Code Sewickley PA 15143		

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) ROTHFUS VICTORY COMMITTEE		
(b) Address (number and street) PO BOX 2485		
(c) City, State, and ZIP Code SPRINGFIELD VA 22152		

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 Rothfus, Keith, , Mr., [Electronically Filed]	Date 08/29/2018
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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)

PROTECT THE HOUSE

(b) Address (number and street)

PO BOX 30844

(c) City, State, and ZIP Code

BETHESDA

MD

20824-0844

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)

PATRIOT DAY III 2018

(b) Address (number and street)

PO BOX 9891

(c) City, State, and ZIP Code

ARLINGTON

VA

22219

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)

PATRIOT DAY IV 2018

(b) Address (number and street)

PO BOX 9891

(c) City, State, and ZIP Code

ARLINGTON

VA

22219

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