

Image# 202111189468612979

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Cruz, Robert 'Rob', , ,		2. Candidate's FEC Identification Number H2IL03147
(b) Address (number and street) <input type="checkbox"/> Check if address changed 9249 South Cicero P.O. Box 482		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code Oak Lawn IL 60453		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate IL 06

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) CRUZ FOR A CAUSE		
(b) Address (number and street) 9249 SOUTH CICERO P.O. BOX 482		
(c) City, State, and ZIP Code OAK LAWN IL 60453		

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 Cruz, Robert 'Rob', , , <i>[Electronically Filed]</i>	Date 11/18/2021
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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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