

Image# 202303079578975983

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) CHAVEZ-DEREMER, LORI, , ,		
(b) Address (number and street) 13203 SE 172ND AVE STE 166 #399		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code HAPPY VALLEY		OR 97086
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House
6. State & District of Candidate OR 05		
2. Candidate's FEC Identification Number H2OR05209		
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 2024 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) LORI CHAVEZ-DEREMER FOR CONGRESS		
(b) Address (number and street) 13203 SE 172ND AVE STE 166 #399		
(c) City, State, and ZIP Code HAPPY VALLEY		
OR 97086		

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) JERRY CARL CANDIDATE FUND		
(b) Address (number and street) PO BOX 852138		
(c) City, State, and ZIP Code MOBILE		
AL 36685		

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 CHAVEZ-DEREMER, LORI, , , [Electronically Filed]	Date 03/07/2023
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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)

Page 2 of 3**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)

TAKE BACK THE HOUSE 2022

(b) Address (number and street)

PO BOX 30844

(c) City, State, and ZIP Code

BETHESDA

MD

20824

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)

NORTHWEST PRINCIPLES JFC

(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)

SCOTT FRANKLIN WINGMAN FUND

(b) Address (number and street)

P.O. BOX 2811

(c) City, State, and ZIP Code

LAKELAND

FL

33806

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)

LORI CHAVEZ-DEREMER VICTORY

(b) Address (number and street)

13203 SE 172ND AVE

STE 166 #399

(c) City, State, and ZIP Code

HAPPY VALLEY

OR

97086

Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

Page 3 of 3DESIGNATION 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)

CHAVEZ-DEREMER FOR OR-05

(b) Address (number and street)

PO BOX 30844

(c) City, State, and ZIP Code

BETHESDA

MD

20824

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 2024

(b) Address (number and street)

PO BOX 30844

(c) City, State, and ZIP Code

BETHESDA

MD

20824

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)

FRESHMAN AGRICULTURAL REPUBLICAN MEMBERS TRUST AKA FARM TRUST

(b) Address (number and street)

PO BOX 30844

(c) City, State, and ZIP Code

BETHESDA

MD

20824

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)

HISPANIC LEADERSHIP TRUST PARTNERSHIP

(b) Address (number and street)

1005 CONGRESS AVE

STE 400

(c) City, State, and ZIP Code

AUSTIN

TX

78701