# FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 5

1. (a) Name of Candidate (in full)					
MILLER-MEEKS, MARIANNE (b) Address (number and street) 11674 90th St		f address cl	nanged		2. Candidate's FEC Identification Number H8IA02043
(c) City, State, and ZIP Code					3. Is This New Amended
Ottumwa		IA	52501	I-8310	Statement (N) OR X (A)
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House			6. State & Dist IA	trict of Candidate 01
DE		F PRINC	IPAL	CAMPAIG	
7. I hereby designate the following na	med political committe	e as my Pr	incipal C	Campaign Com	
NOTE: This designation should be	filed with the appropria	ate office lis	sted in th	e instructions.	(year of election)
(a) Name of Committee (in full)					
MILLER-MEEKS FO	OR CONGRES	SS			
(b) Address (number and street)					
PO Box 33					
(c) City, State, and ZIP Code					
Ottumwa				IA	52501-0033
<ol> <li>I hereby authorize the following nar candidacy.</li> <li>NOTE: This designation should be</li> </ol>					nmittee, to receive and expend funds on behalf of my
(a) Name of Committee (in full)		1.3		-	
Take Back The Hou	ISE 2022				
(b) Address (number and street) PO Box 30844					
(c) City, State, and ZIP Code					
Bethesda				MD	20824-0844
I certify that I have exa	amined this Statement	and to the	best of ı	ny knowledge a	and belief it is true, correct and complete.
Signature of Candidate					Date ·
MILLER-MEEKS, MARIANNETTE JAI	NE, , ,				08/20/2024
NOTE: Submission of false, erroneous	, or incomplete inform	ation may s	subject th	ne person signi	ng this Statement to penalties of 2 U.S.C. §437g.

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

## 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)		
GOP WINNING WOMEN		
(b) Address (number and street)		
228 S. Washington Street		
Suite 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)		
2022 PHASE 1 PATRIOT DAY JFC		
(b) Address (number and street)		
228 S. WASHINGTON STREET		
SUITE 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)		
VAN DUYNE MILLER-MEEKS PAC		
(b) Address (number and street)		
PO BOX 341027		
(c) City, State, and ZIP Code		
AUSTIN	ТХ	78734

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)

 2022 PHASE 2 PATRIOT DAY JFC

 (b) Address (number and street)

 228 S. WASHINGTON STREET

 SUITE 115

 (c) City, State, and ZIP Code

 ALEXANDRIA
 VA

 22314

Image# 202408209666563992

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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(a) Name of Committee (in full)			
RECONNECTING URBAN AND RURA	L AMERICAN LIFE		
(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)		
IOWA VICTORY FUND		
(b) Address (number and street)		
824 S. MILLEDGE AVE STE 101		
(c) City, State, and ZIP Code		
ATHENS	GA	30605

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)		
MILLER-MEEKS VICTORY FUND		
(b) Address (number and street) PO BOX 183		
(c) City, State, and ZIP Code HUDSON	WI	54016

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

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)			
GOP WINNING WOMEN 2024			
(b) Address (number and street)			
228 S WASHINGTON ST			
STE 115			
(c) City, State, and ZIP Code			
ALEXANDRIA	VA	22314	

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(a) Name of Committee (in full)		
SCALISE LEADERSHIP FUND 2024		
(b) Address (number and street) 320 1ST ST SE		
(c) City, State, and ZIP Code WASHINGTON	DC	20003

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)		
AMERICAN BATTLEGROUND FUND		
(b) Address (number and street)		
PO BOX 30844		
(c) City, State, and ZIP Code		
BETHESDA	MD	20824

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(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)			
IOWA VICTORY FUND 2024			
(b) Address (number and street)			
320 FIRST STREET SE			
(c) City, State, and ZIP Code			
WASHINGTON	DC	20003	

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.

(b) Address (number and street)		
(c) City, State, and ZIP Code		

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)

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code

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(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code