Image# 14960609008

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)
Martha E McSally

(b) Address (number and street) ☐ Check if address changed
PO Box 19128

2. Candidate's FEC Identification Number
H2AZ08102

(c) City, State, and ZIP Code
Tucson AZ 85731-9128

3. Is This Statement ☐ New (N) **OR** ☒ Amended (A)

4. Party Affiliation
REPUBLICAN PARTY

5. Office Sought
House

6. State & District of Candidate
AZ 02

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 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)
McSally for Congress

(b) Address (number and street)
PO Box 19128

(c) City, State, and ZIP Code
Tucson AZ 85731-9128

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)
McSally Tobin Victory Committee

(b) Address (number and street)
228 S Washington Street
Suite 115

(c) City, State, and ZIP Code
Alexandria VA 22314-5404

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
Martha E McSally ***[Electronically Filed]***	04/06/2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

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)

Winning Women

(b) Address (number and street)

228 S Washington Street
Suite 115

(c) City, State and ZIP Code

Alexandria VA 22314-5404

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

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

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

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