FEC FORM 2

STATEMENT OF CANDIDACY

SECRETARY OF THE SENATE

16 SEP 14 AM 10: 19

1. (a) Name of Candidate (in full) Ted Strickland		
(b) Address (number and street) 5661 Chowning Way	☐ Check if address changed	2. Candidate's FEC Identification Number S6OH00254
(c) City, State, and ZIP Code Columbus, OH 43213		3. Is This Statement ☐ New (N) OR ☑ Amended (A)
4. Party Affiliation DEM	5. Office Sought Senate	6. State & District of Candidate OH

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election) election(s).

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)

Strickland for Senate

(b) Address (number and street)

PO Box 2196

(c) City, State, and ZIP Code

Columbus, OH 43216

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)

Strickland Ohio Victory Fund 2016

(b) Address (number and street)

611 Pennsylvania Ave Ste 143

(c) City, State, and ZIP Code

Washington, DC 20003

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
Ted Strickland	8/10/2016

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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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)

Justice 2016

(b) Address (number and street)

918 Pennsylvania Ave SE

(c) City, State, and ZIP Code

Washington, DC 20003

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)

Bring Back Sense to the Senate 2016

(b) Address (number and street)

120 Maryland Ave NE

(c) City, State, and ZIP Code

Washington, DC 20002

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)

Silicon Valley Victory 2016

(b) Address (number and street)

120 Maryland Ave NE

(c) City, State, and ZIP Code

Washington, DC 20002

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.

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FORM 2S - STATEMENT OF CANDIDACY (SUPPLEMENTAL PAGE)

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Battleground Victory 2016

(b) Address (number and street)

120 Maryland Ave NE

(c) City, State, and ZIP Code

Washington, DC 20002

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)

Take Back The Majority 2016

(b) Address (number and street)

918 Pennsylvania Ave SE

(c) City, State, and ZIP Code

Washington, DC 20003

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)

Green Senate Impact 2016

(b) Address (number and street)

918 Pennsylvania Ave SE

(c) City, State, and ZIP Code

Washington, DC 20003

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)

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FORM 2S - STATEMENT OF CANDIDACY (SUPPLEMENTAL PAGE)

Progressive Victory 2016

(b) Address (number and street)
P.O. Box#583144

(c) City, State, and ZIP Code

Minneapolis, MN 55458

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)

Impact Senate 2016

(b) Address (number and street)
918 Pennsylvania Ave SE

(c) City, State, and ZIP Code

Washington, DC 20003

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)

Democratic Senate Victory 2016

(b) Address (number and street)
120 Maryland Ave NE

(c) City, State, and ZIP Code

Washington, DC 20002

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)

Schumer Committee for the Majority

(b) Address (number and street)
120 Maryland Avenue NE

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FORM 2S - STATEMENT OF CANDIDACY (SUPPLEMENTAL PAGE)

(c) City, State, and ZIP Code

Washington, DC 20002

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)

IL OH WI Victory Fund

(b) Address (number and street)

918 Pennsylvania Ave SE

(c) City, State, and ZIP Code

Washington, DC 20003

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