

Image# 201911069165331301

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) COTTON, THOMAS, , ,			2. Candidate's FEC Identification Number S4AR00103	
(b) Address (number and street) 2226 COTTONDALE LN SUITE 200		<input checked="" type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code LITTLE ROCK AR 72202		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	6. State & District of Candidate AR 00		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) COTTON FOR SENATE, INC.		
(b) Address (number and street) 2226 COTTONDALE LN SUITE 200		
(c) City, State, and ZIP Code LITTLE ROCK AR 72202		

### 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) COTTON VICTORY		
(b) Address (number and street) 901 N WASHINGTON STREET SUITE 700		
(c) City, State, and ZIP Code ALEXANDRIA VA 22314		

*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 Cotton, Tom, , ,  <i>[Electronically Filed]</i>	Date 11/06/2019
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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)

**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)

**DEFEND THE SENATE**

(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)

**THE VICTORY CLUB**

(b) Address (number and street)

PO BOX 60148

(c) City, State, and ZIP Code

WASHINGTON

DC

20039

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

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