

Image# 201904159146203344

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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Tillis, Thom, R., Sen.,		
(b) Address (number and street) PO Box 97396		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Raleigh NC 27624		2. Candidate's FEC Identification Number S4NC00162
4. Party Affiliation REPUBLICAN PARTY		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
5. Office Sought Senate		6. State & District of Candidate NC

### 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) Thom Tillis Committee		
(b) Address (number and street) PO Box 97396		
(c) City, State, and ZIP Code Raleigh NC 27624		

### 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) Tillis Majority Committee		
(b) Address (number and street) PO Box 97275		
(c) City, State, and ZIP Code Raleigh NC 27624		

*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 Tillis, Thom, R., Sen.,  [Electronically Filed]	Date 04/15/2019
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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 CommitteesPage 2 of 3

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)

Tillis-NRSC Committee

(b) Address (number and street)

228 S Washington St

(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)

2018 TILLIS SENATE CANDIDATE 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)

CHAIRMAN'S VICTORY FUND

(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)

DEFEND THE SENATE

(b) Address (number and street)

228 S WASHINGTON STREET SUITE 115

(c) City, State, and ZIP Code

ALEXANDRIA

VA

22314



Optional Supplemental Page for Designation  
of Additional Authorized CommitteesPage 3 of 3

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)

SENATE FIREWALL 2020

(b) Address (number and street)

901 N WASHINGTON STSUITE 700

(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)

SENATE VICTORY 2020

(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)

(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