PAGE 1/3 SECRETARY OF THE SENATE

FEC FORM 2 STATEMENT OF CANDIDACY

14 SEP -9 PM 2: 04

(a) Name of Candidate (in full)					
Thom R Tillis	_				
(b) Address (number and street) PO Box 97396	☐ Check if address changed		ged	Candidate's FEC Identification Number S4NC00162	
(c) City, State, and ZIP Code				3. Is This New Amended	
Rateigh		NC 2	7624	Statement (N) OR X (A)	
4. Party Affiliation	5. Office Sought		6. State & Dis	trict of Candidate	
REPUBLICAN PARTY	Senate		NC		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE					
7. I hereby designate the following name	ned political committee	as my Princi	pal Campaign Com	mittee for the 2014 election(s). (year of election)	
NOTE: This designation should be fi	led with the appropriate	office listed	in the instructions.		
(a) Name of Committee (in full)					
Thom Tillis Committe	ee				
(b) Address (number and street) PO Box 97396				- 100 May 100	
(c) City, State, and ZIP Code		·			
Rateigh			NC	27624	
Note: This designation should be fi				mmittee, to receive and expend funds on behalf of my	
(a) Name of Committee (in full)					
TILLIS VICTORY CO	DMMITTEE				
(b) Address (number and street) 228 S WASHINGTON STREE	Г#115				
(c) City, State, and ZIP Code		·			
ALEXANDRIA			VA	22314	
l certify that I have exa	mined this Statement ar	nd to the bes	t of my knowledge a	and belief it is true, correct and complete.	
Signature of Candidate			10	Date	
Thom R Tillis	us R.	1	This	09/04/2014	
NOTE: Submission of false, erroneous,	or incomplete informati	on may subje	ect the person signii	ng this Statement to penalties of 2 U.S.C. §437g.	
•	•	•	•	FEC FORM 2 (REV. 02/2009	

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

DESIGNATION OF OTHER AUTHORIZED COMMITTEES [ADDITION OF CONTROLLING ADDITION OF COMMITTEES (ADDITION OF COMMITTEES)	TIONAL]
I hereby authorize the following named committee, which is NOT my principal campaign committee, to r 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) FRIENDS FOR AN AMERICAN MAJORITY	
(b) Address (number and street) 228 S WASHINGTON ST STE 115	
(c) City, State and ZIP Code	
ALEXANDRIA VA 22314	
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	TIONAL]
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)	····
Thom Tillis Victory Committee	
(b) Address (number and street) PO Box 97275	
(c) City, State and ZIP Code	
Rateigh NC 27624	
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	TIONAL]
I hereby authorize the following named committee, which is NOT my principal campaign committee, to r 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)	
Founders Senate Candidate Committee	
(b) Address (number and street) 228 S Washington St, STE115	
(c) City, State and ZIP Code	
Alexandria VA 22314	

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 3 /
DESIGNAT	ION OF OTHER AUTHORIZED COM (Including Joint Fundraising Representative	
I hereby authorize the following named committee, wh candidacy.	nich is NOT my principal campaign committee, to rece	eive and expend funds on behalf of my
NOTE: This designation should be filed with t	the principal campaign committee.	
(a) Name of Committee (in full) ALLIANCE FOR ADVANCE	ING AMERICA	
(b) Address (number and street) 228 S WASHINGTON ST STE 115		
(c) City, State and ZIP Code		
ALEXANDRIA	VA	22314
DESIGNAT	FION OF OTHER AUTHORIZED COL (Including Joint Fundraising Representative	
I hereby authorize the following named committee, who candidacy.	nich is NOT my principal campaign committee, to rece	eive and expend funds on behalf of my
NOTE: This designation should be filed with t	the principal campaign committee.	
(a) Name of Committee (in full)		
MCCONNELL-TILLIS MAJ	ORITY COMMITTEE	
(b) Address (number and street) PO BOX 97275		
(c) City, State and ZIP Code		
RALEIGH	NC	27624
DESIGNAT	ION OF OTHER AUTHORIZED COM (Including Joint Fundraising Representative	
I hereby authorize the following named committee, who candidacy.	nich is NOT my principal campaign committee, to r	and expend funds on behalf of my
NOTE:This designation should be filed with t	the principal campaign committee.	
(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State and ZtP Code		

14026694432) Thom Tills Committee PO Box 97396 Raleigh, NC 27624



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HART SENATE OFFICE BUILDI SUITE 232 WASHINGTON, DC 20510-7116 PHONE: (202) 224-0322

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