

FEC FORM 2

STATEMENT OF CANDIDACY

REC'D
SECRETARY
PUBLIC

14 JUL 14 PM 12:57

1. (a) Name of Candidate (in full) JONI ERNST		
(b) Address (number and street) 910 N 6TH ST		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code RED OAK IA 51566		2. Candidate's FEC Identification Number S4IA00129
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
6. State & District of Candidate IA		

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) JONI ERNST FOR U.S. SENATE, INC.		
(b) Address (number and street) PO BOX 93441		
(c) City, State, and ZIP Code DES MOINES IA 50393		

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) VICTORY TRUST 2014		
(b) Address (number and street) 228 S WASHINGTON STREET SUITE 115		
(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 JONI ERNST	Date 07/10/2014
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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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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

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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)

FOUNDERS SENATE CANDIDATE COMMITTEE

(b) Address (number and street)

228 S. WASHINGTON STREET
SUITE 115

(c) City, State and ZIP Code

ALEXANDRIA

VA

22314

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)

SRGE VICTORY FUND

(b) Address (number and street)

901 N WASHINGTON ST
SUITE 700

(c) City, State and ZIP Code

ALEXANDRIA

VA

22314

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 FOR THE US SENATE

(b) Address (number and street)

228 S. WASHINGTON STREET
SUITE 115

(c) City, State and ZIP Code

ALEXANDRIA

VA

22314

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Post Office



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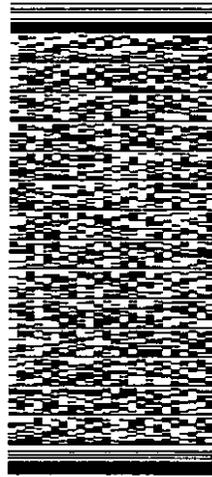


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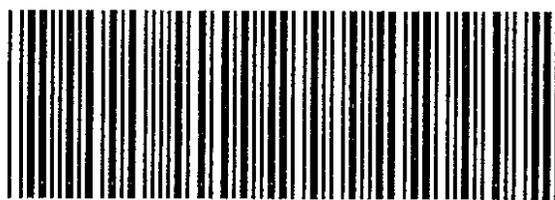
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