FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) GRASSLEY, CHARLES E, , ,				
(b) Address (number and street) 31705 WESTBROOK ST	Check if address	s changed		2. Candidate's FEC Identification Number S0IA00028
(c) City, State, and ZIP Code				3. Is This New Amended
CEDAR FALLS	IA	50613		Statement (N) OR X (A)
4. Party Affiliation	5. Office Sought		6. State & Dist	rict of Candidate
REPUBLICAN PARTY	Senate		IA	00
DE	ESIGNATION OF PRI			
7. I hereby designate the following na	med political committee as my	/ Principal Ca	ampaign Comr	nittee for the 2022 election(s). (year of election)
NOTE: This designation should be	filed with the appropriate office	e listed in the	e instructions.	
(a) Name of Committee (in full) GRASSLEY COMN	IITTEE, INC.			
(b) Address (number and street) PO BOX 1000				
(c) City, State, and ZIP Code				
DES MOINES			IA	50304-1000
 I hereby authorize the following nar candidacy. NOTE: This designation should be 				nmittee, to receive and expend funds on behalf of my
(a) Name of Committee (in full)				
Hawkeye Fund				
(b) Address (number and street) PO Box 156				
(c) City, State, and ZIP Code				
Des Moines			IA	50301-0156
I certify that I have exa	amined this Statement and to a	the best of m	ny knowledge a	and belief it is true, correct and complete.
Signature of Candidate				Date
Grassley, Charles, , ,		[Electr	onically Filed]	11/03/2022
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.				

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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)		
2021 SENATORS CLASSIC COMMITTEE		
(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)		
TEAM MCCONNELL		
(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)		
2022 Senators Classic Committee		
(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)		
CORNYN VICTORY COMMITTEE		
(b) Address (number and street) PO BOX 13026		
(c) City, State, and ZIP Code		
AUSTIN	NC	78711

Image# 202211039546701647

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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(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)			
TAKE BACK THE SENATE			
(b) Address (number and street) PO BOX 9891			
(c) City, State, and ZIP Code			
ARLINGTON	VA	22219	

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 Senate Victory 2022		
(b) Address (number and street) 901 N Washington St, Ste 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) HINSON GRASSLEY VICTORY		
(b) Address (number and street) PO BOX 811		
(c) City, State, and ZIP Code		
MARION	IA	52302

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)

FRIENDS OF MITT JOINT FUNDRAISING COMMITTEE

(b) Address (number and street) C/O RED CURVE SOLUTIONS		
138 CONANT STREET, SUITE 201		
(c) City, State, and ZIP Code		
BEVERLY	MA	01915