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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in f											
		SINEMA, KYRSTEN, , , Address (number and street)					2. Candidate's FEC Identification Number					
	PO BOX 7586			neck ii addie	ss changed		S8AZ00197					
	(c) City, State, and ZIP Cod	е				_	3. Is Thi			v	Amended	
	PHOENIX			AZ	Z 8501		Stater		OR	×	(A)	
4.	Party Affiliation		5. Office Soug			6. State & Dist	trict of Candi 00	date				
	DEMOCRATIC PARTY		Senate			AZ	00					
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)											
	NOTE: This designation should be filed with the appropriate office listed in the instructions.											
	(a) Name of Committee (in SINEMA FOR	,	ONA									
	(b) Address (number and st PO BOX 7586	reet)										
	(c) City, State, and ZIP Cod	e										
	PHOENIX					AZ	8501 ⁻	1				
	DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)											
8.	I hereby authorize the follow candidacy.	ving nam	ed committee,	, which is NO	T my princip	al campaign cor	mmittee, to re	eceive and exp	end fund	s on beh	nalf of my	
	NOTE: This designation sho	ould be fi	led with the pri	incipal campa	aign committ	ee.						
	(a) Name of Committee (in SINEMA VICT	,	ELIND									
	SINEIVIA VICT	OKI	FUND									
	(b) Address (number and st 2910 E GARY WAY	reet)										
	() 0 ; 0 ; 17 0 ; 1											
	(c) City, State, and ZIP Cod	е				A 7	05046					
	PHOENIX					AZ	85042	<u>′</u>				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.												
Sig	gnature of Candidate						Date					
Sinema, Kyrsten, , ,			[Electronically Filed]			11/19/20	018					
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

Page ___2 **of** _2___

DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

	(including Joint rundraising	nepresentative	55)									
3.	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)											
	SINEMA KENNEDY VICTORY FUND											
	(b) Address (number and street) 918 PENNSYLVANIA AVE SE											
	(c) City, State, and ZIP Code											
	WASHINGTON	DC	20003									
3.	. I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE : This designation should be filed with the principal campaign		mittee, to receive and expend funds on behalf of my									
(a) Name of Committee (in full) VAN HOLLEN/SINEMA 2018 VICTORY FUND												
	(b) Address (number and street) 10605 CONCORD ST STE 202											
	(c) City, State, and ZIP Code											
	KENSINGTON	MD	20895									
3.	. I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE : This designation should be filed with the principal campaigr		mittee, to receive and expend funds on behalf of my									
	(a) Name of Committee (in full)											
	(4) 14.10 3. 30.11.14.)											
	(b) Address (number and street)											
	(c) City, State, and ZIP Code											
2	. I hereby authorize the following named committee, which is NOT my principal of	campaign com	mittee, to receive and expend funds on hehalf of my									
э.	candidacy. NOTE : This designation should be filed with the principal campaigr		militee, to receive and expend funds on behalf of my									
	(a) Name of Committee (in full)											
	(b) Address (number and street)											
	(a) City Chata and ZID Code											
	(c) City, State, and ZIP Code											