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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)					
	MCSALLY, MARTHA, , ,		معاملة مطاعم			2. Candidate's FFC Identification Number
	(b) Address (number and street) PO BOX 19128		heck if addre	ss changed		Candidate's FEC Identification Number S8AZ00221
	(c) City, State, and ZIP Code					3. Is This New Amended
	TUCSON		AZ	8571		Statement (N) OR (A)
4.	Party Affiliation	5. Office Soug	jht			rict of Candidate
	REPUBLICAN PARTY	Senate			AZ	00
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIGN	N COMMITTEE
7.	I hereby designate the following nar	ned political co	mmittee as m	y Principal (Campaign Comn	nittee for the $\frac{2020}{\text{(year of election)}}$ election(s).
	NOTE: This designation should be f	iled with the ap	propriate offi	ce listed in t	ne instructions.	
	(a) Name of Committee (in full) MCSALLY FOR SEI	NATE INC				
	(b) Address (number and street) PO BOX 19128					
	(c) City, State, and ZIP Code					
	TUCSON				AZ	85710
	DE				THORIZED g Representative	COMMITTEES es)
8.	I hereby authorize the following nam candidacy.	ned committee,	which is NO	Γ my princip	al campaign con	nmittee, to receive and expend funds on behalf of my
	NOTE: This designation should be f	iled with the pr	incipal campa	ign committe	ee.	
	(a) Name of Committee (in full)					
	MCSALLY FOR CO	NGRESS	6			
	(b) Address (number and street) PO BOX 19128					
	(c) City, State, and ZIP Code					
	TUCSON				AZ	85731-9128
		mined this Sta	tement and to	the best of	my knowledge a	nd belief it is true, correct and complete.
	gnature of Candidate					Date
M	CSALLY, MARTHA, , ,			[Elect	tronically Filed]	04/27/2020
		or incomplete	information n			04/27/2020 ng this Statement to penalties of 2 U.S.C. §437g.
		or incomplete	information n			

FEC FORM 2 (REV. 02/2009)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Includina Join	t 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)					
DEFEND THE SENATE					
(b) Address (number and street) 228 S WASHINGTON STREET SUITE 115					
(c) City, State, and ZIP Code					
ALEXANDRIA	VA	22314			
I hereby authorize the following named committee, which is NOT my procandidacy. NOTE: This designation should be filed with the principal committee.			on behalf of my		
(a) Name of Committee (in full) MCSALLY VICTORY COMMITTE					
(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 procandidacy. NOTE: This designation should be filed with the principal committee (in full) GOP WINNING WOMEN			on behalf of my		
(b) Address (number and street) 228 S. WASHINGTON ST.					
STE. 115 (c) City, State, and ZIP Code					
ALEXANDRIA	VA	22314			
I hereby authorize the following named committee, which is NOT my procandidacy. NOTE: This designation should be filed with the principal committee.			on behalf of my		
(a) Name of Committee (in full)					
UNITED FOR A US SENATE MAJORITY					
(b) Address (number and street) 824 S MILLEDGE AVE STE 101					
(c) City, State, and ZIP Code					

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives	(Including	Joint F	undraisina	Represe	entatives)
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8.	I hereby authorize the following named committee, which is NOT r candidacy. NOTE : This designation should be filed with the principal candidacy.			,
	(a) Name of Committee (in full) TILLIS AND COLLEAGUES VICTORY C	OMMITTEE		
	(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 r candidacy. NOTE : This designation should be filed with the princip		·	,
	(a) Name of Committee (in full) MCSALLY SENATE VICTORY FUND 20:	20		
	(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 r candidacy. NOTE: This designation should be filed with the principal (a) Name of Committee (in full) WHITEFISH VICTORY			<i>'</i>
	(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 r candidacy. NOTE : This designation should be filed with the principal committee.			,
	(a) Name of Committee (in full)			-
	PROTECTING THE MAJORITY			
	(b) Address (number and street) 228 S. WASHINGTON ST.			_
	STE. 115			
	(c) City, State, and ZIP Code			_
	ALEXANDRIA	VA	22314	

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

3.	I hereby authorize the following named committee, which is NC candidacy. NOTE : This designation should be filed with the pri			behalf of my
	(a) Name of Committee (in full) GREAT ARIZONA FUND			
	(b) Address (number and street) PO BOX 341027			
	(c) City, State, and ZIP Code AUSTIN	TX	78734	
3.	I hereby authorize the following named committee, which is NC candidacy. NOTE : This designation should be filed with the pri		•	behalf of my
	(a) Name of Committee (in full) 2020 SENATE BATTLEGROUND CON	MITTEE		
	(b) Address (number and street) 824 S MILLEDGE AVE STE 101			
	(c) City, State, and ZIP Code ATHENS	GA	30605	
3.	I hereby authorize the following named committee, which is NC candidacy. NOTE : This designation should be filed with the pri			behalf of my
3.				behalf of my
3.	candidacy. NOTE : This designation should be filed with the pri (a) Name of Committee (in full)			behalf of my
3.	candidacy. NOTE: This designation should be filed with the pri (a) Name of Committee (in full) KEEP THE SENATE RED (b) Address (number and street)			behalf of my
	candidacy. NOTE: This designation should be filed with the pri (a) Name of Committee (in full) KEEP THE SENATE RED (b) Address (number and street) PO BOX 76024 (c) City, State, and ZIP Code	DC T my principal campaign	20002 committee, to receive and expend funds on	
	candidacy. NOTE: This designation should be filed with the pri (a) Name of Committee (in full) KEEP THE SENATE RED (b) Address (number and street) PO BOX 76024 (c) City, State, and ZIP Code WASHINGTON I hereby authorize the following named committee, which is NO	DC T my principal campaign	20002 committee, to receive and expend funds on	
	candidacy. NOTE: This designation should be filed with the pri (a) Name of Committee (in full) KEEP THE SENATE RED (b) Address (number and street) PO BOX 76024 (c) City, State, and ZIP Code WASHINGTON I hereby authorize the following named committee, which is NO candidacy. NOTE: This designation should be filed with the pri (a) Name of Committee (in full)	DC T my principal campaign	20002 committee, to receive and expend funds on	
	candidacy. NOTE: This designation should be filed with the pri (a) Name of Committee (in full) KEEP THE SENATE RED (b) Address (number and street) PO BOX 76024 (c) City, State, and ZIP Code WASHINGTON I hereby authorize the following named committee, which is NO candidacy. NOTE: This designation should be filed with the pri (a) Name of Committee (in full) THE VICTORY CLUB	DC T my principal campaign	20002 committee, to receive and expend funds on	

Optional Supplemental Page for Designation of Additional Authorized Committees

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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 to candidacy. NOTE: This designation should be filed with the principal campaign committee.		
	(a) Name of Committee (in full)	
	SENATE FIREWALL COMMITTEE III	
	(b) Address (number and street) 901 N WASHINGTON ST SUITE 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)	
	(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	
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	