

SECRETARY OF THE SENATE
17 AUG - 7 AM 11 50

JOSH HAWLEY SENATE EXPLORATORY COMMITTEE

Secretary of the Senate-Public Records
232 Hart Senate Building
Washington, DC 20510


Phone-202-224-3121

To Whom It May Concern:

Enclosed is the FEC Form 2 Statement of Candidacy for the newly created Josh Hawley Senate Exploratory Committee.

Please let me know if you have any questions 704-668-1993.

Thanks



Salvatore Purpura
Treasurer
Josh Hawley Senate Exploratory Committee

201708070200245830

FEC FORM 2

STATEMENT OF CANDIDACY

SECRETARY OF THE SENATE

17 AUG -7 AM 11:50

| | | | | |
|--|-------------------------|--|--|--|
| 1. (a) Name of Candidate (in full) Joshua David Hawley | | | 2. FEC Candidate Identification Number | |
| (b) Address (number and street) c/o 7253 Watson Rd, #1090 | | <input type="checkbox"/> Check if address changed | | |
| (c) City, State, and ZIP Code St. Louis, MO 63119 | | 3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A) | | |
| 4. Party Affiliation REP | 5. Office Sought SEN | 6. State & District of Candidate Missouri | | |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) Josh Hawley Senate Exploratory Committee |
| (b) Address (number and street) c/o 7253 Watson Rd, #1090 |
| (c) City, State, and ZIP Code St. Louis, MO 63119 |

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. NONE

| |
|---------------------------------|
| (a) Name of Committee (in full) |
| (b) Address (number and street) |
| (c) City, State, and ZIP Code |

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  | Date 8/2/17 |
|---|----------------|

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

| | | | | | | | | | |
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United States Post Office



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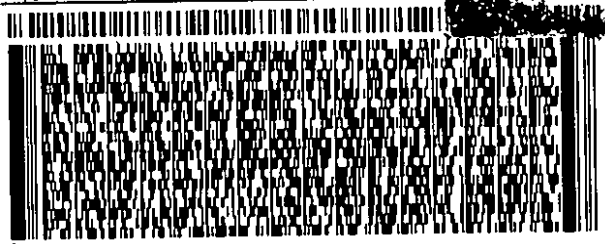
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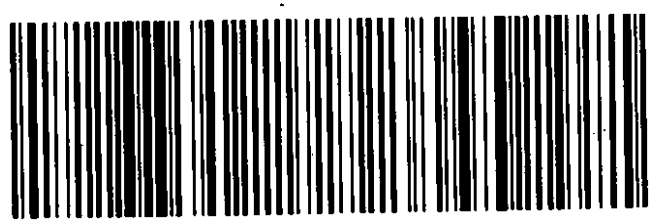


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United States Senate

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OFFICE OF PUBLIC RECORDS

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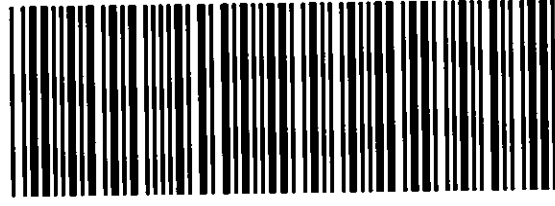
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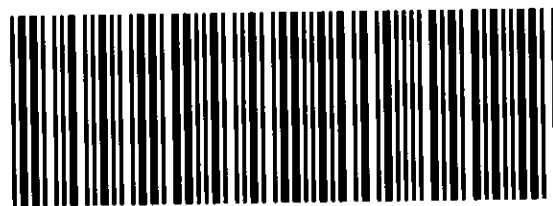
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