

Image# 201906149150035008

FEC FORM 2

STATEMENT OF CANDIDACY

| | | | | |
|---|-----------------------------------|--|--|--|
| 1. (a) Name of Candidate (in full) Braun, Mike, , , | | | 2. Candidate's FEC Identification Number S8IN00171 | |
| (b) Address (number and street) 505 Main St | | <input checked="" type="checkbox"/> Check if address changed | | |
| (c) City, State, and ZIP Code Jasper IN 47546-3133 | | 3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A) | | |
| 4. Party Affiliation REPUBLICAN PARTY | 5. Office Sought Senate | 6. State & District of Candidate IN 00 | | |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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) MIKE BRAUN FOR INDIANA | | |
| (b) Address (number and street) PO Box 159 | | |
| (c) City, State, and ZIP Code Zionsville IN 46077-0159 | | |

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) Braun Solutions Committee | | |
| (b) Address (number and street) 499 S Capitol St SW Ste 405 | | |
| (c) City, State, and ZIP Code Washington DC 20003-4018 | | |

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 Braun, Mike, , , <i>[Electronically Filed]</i> | Date 06/14/2019 |
|--|---------------------------|

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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: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F2N
Transaction ID :

Form/Schedule:
Transaction ID:

Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

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)

Hoosier Conservative Fund

(b) Address (number and street)

PO Box 4

(c) City, State, and ZIP Code

Westfield

IN

46074-0004

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)

Growing our Senate Majority

(b) Address (number and street)

824 S Milledge Ave

Ste 101

(c) City, State, and ZIP Code

Athens

GA

30605-1332

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)

Protecting The Majority Committee

(b) Address (number and street)

228 S Washington St

Ste 115

(c) City, State, and ZIP Code

Alexandria

VA

22314-5404

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)

Winsome Leaders II

(b) Address (number and street)

901 N Washington ST Ste 700

(c) City, State, and ZIP Code

Alexandria

VA

22314-1535

Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

Grow The Majority

(b) Address (number and street)

PO Box 3986

(c) City, State, and ZIP Code

Washington

DC

20027-0986

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

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(b) Address (number and street)

(c) City, State, and ZIP Code

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(c) City, State, and ZIP Code