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FEC FORM 2

STATEMENT OF CANDIDACY

							=
1.	(a) Name of Candidate (in full)						
	Sheehy, Tim, , ,					O Condidatela FFO Identification Number	_
	(b) Address (number and street) PO Box 7209	ПС	neck if addre	ss cnanged		Candidate's FEC Identification Number S4MT00183	
	(c) City, State, and ZIP Code					3. Is This New Amended	
	Helena		МТ	5960		Statement (N) OR (A)	
4.	Party Affiliation	5. Office Soug	ht			trict of Candidate	
	REPUBLICAN PARTY	Senate			MT	00	
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIG	N COMMITTEE	
7.	I hereby designate the following nar	med political co	mmittee as m	y Principal	Campaign Comr	mittee for the $\frac{2024}{\text{(year of election)}}$ 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)						
	TIM SHEEHY FOR	MONTAN	Δ				
	(b) Address (number and street)						
	PO BOX 6456						
	(c) City, State, and ZIP Code						_
	HELENA				MT	59604	
							Π
	DE			_	FHORIZED g Representativ	COMMITTEES ves)	
0	I hereby outherize the following non	and committee	which is NO	F my princip	al aamnaign aan	mmittee to receive and expend funds on hehalf of my	
ο.	candidacy.	ied committee,	WILLIAM IS INC	г тту рттстр	ai campaign coi	mmittee, to receive and expend funds on behalf of my	
	NOTE: This designation should be f	iled with the pri	ncipal campa	ign committ	ee.		
	(a) Name of Committee (in full)						_
	CORNYN VICTORY COMMITTEE						
	(b) Address (number and street)						_
	PO BOX 13026						
	(c) City, State, and ZIP Code						_
	AUSTIN				TX	78711	
	7.00				.,,		
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.							
Si	gnature of Candidate					Date	-
SI	heehy, Tim, , ,					05/13/2024	
51	iceny, 1 im, , ,					03/13/2024	
							_
NC	OTE: Submission of false, erroneous,	, or incomplete	information n	nay subject t	he person signir	ng 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

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representa	atives'
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	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)						
	MAJORITY MAKERS FUND						
	(b) Address (number and street) 421 OFFICE PARK DR						
	(c) City, State, and ZIP Code MOUNTAIN BROOK	AL	35223				
8.		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)						
	2024 REPUBLICAN SENATE VICTORY						
	(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 candidacy. NOTE : This designation should be filed with the principal (a) Name of Committee (in full)			ehalf of my			
	SHEEHY VICTORY COMMITTEE						
	(b) Address (number and street) 228 S WASHINGTON ST						
	STE 115 (c) City, State, and ZIP Code						
	ALEXANDRIA	VA	22314				
8.	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)						
	RICKETTS SHEEHY VICTORY COMMITTE	RICKETTS SHEEHY VICTORY COMMITTEE					
	(b) Address (number and street) 228 S WASHINGTON ST						
	STE 115 (c) City, State, and ZIP Code						
	ALEXANDRIA	VA	22314				

FEC Form 2S (Revised 02/2017)

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 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)							
	BATTLEFIELD FUND 2023							
	(b) Address (number and street)							
	228 S WASHINGTON ST STE 115							
	(c) City, State, and ZIP Code							
	ALEXANDRIA	VA	22314					
3.	I hereby authorize the following named committee, which is NOT my princicandidacy. NOTE : This designation should be filed with the principal camp							
	(a) Name of Committee (in full)							
	SHEEHY MAJORITY COMMITTEE							
	(b) Address (number and street) 228 S WASHINGTON ST STE 115							
	(c) City, State, and ZIP Code							
	ALEXANDRIA	VA	22314					
3.	I hereby authorize the following named committee, which is NOT my princi							
	candidacy. NOTE : This designation should be filed with the principal camp (a) Name of Committee (in full)	paign committee	ə. 					
	RECLAIM THE MAJORITY							
	(b) Address (number and street) 421 OFFICE PARK DR							
	(c) City, State, and ZIP Code							
	MOUNTAIN BROOK	AL	35223					
3.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	SENATE PATH TO VICTORY 2024							
	(b) Address (number and street) 421 OFFICE PARK DR							
	(c) City, State, and ZIP Code		_					
	BIRMINGHAM	AL	35223					

FEC Form 2S (Revised 02/2017)

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 behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	BARRASSO SHEEHY VICTORY COMMITTEE					
	(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 candidacy. NOTE : This designation should be filed with the principal campaign committee.						
	(a) Name of Committee (in full) 2024 THUNE REPUBLICAN SENATE VICTORY					
	(b) Address (number and street) 228 S. WASHINGTON STREET SUITE 115	-				
	(c) City, State, and ZIP Code ALEXANDRIA VA 22314					
	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.	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)					
	(b) Address (number and street)	_				
	(c) City, State, and ZIP Code	-				