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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Lamb, Mark, , ,							
	(b) Address (number and street) 530 E McDowell Rd #107 Bldg 274	t)				Candidate's FEC Identification Number S4AZ00188		
	(c) City, State, and ZIP Code						lew Amended	
	Phoenix		AZ	8500)4	Statement (1	N) OR (A)	
4.	Party Affiliation	5. Office Sough	nt		6. State & Dist	rict of Candidate		
	REPUBLICAN PARTY	Senate			AZ	00		
	DE	SIGNATION	OF PR	INCIPAL	CAMPAIGN	N 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 full)							
	Mark Lamb for Sena	ate						
	(b) Address (number and street) 530 E McDowell Rd #107 Bldg 274							
	(c) City, State, and ZIP Code							
	Phoenix				AZ	85004		
	THOMAX							
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 f	iled with the prin	cipal campa	ign commit	ee.			
	(a) Name of Committee (in full)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
	I certify that I have exa	mined this State	ement and to	the best of	my knowledge a	and belief it is true, correc	t and complete.	
e:	gnature of Candidate					Date		
						Date	_	
L	umb, Mark, , ,			[Elec	tronically Filed]	04/10/2023		
N	OTE: Submission of false, erroneous,	or incomplete in	nformation m	nay subject	the person signir	ng this Statement to pena	lties of 2 U.S.C. §437g.	
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FEC FORM 2 (REV. 02/2009)