

Image# 202109309467149060

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) MURKOWSKI, LISA, , ,		2. Candidate's FEC Identification Number S4AK00099
(b) Address (number and street) <input type="checkbox"/> Check if address changed PO BOX 100847		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code ANCHORAGE AK 99510		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	6. State & District of Candidate AK 00

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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) LISA MURKOWSKI FOR US SENATE		
(b) Address (number and street) PO BOX 100847		
(c) City, State, and ZIP Code ANCHORAGE AK 99510		

### 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) CORNYN VICTORY COMMITTEE		
(b) Address (number and street) PO BOX 13026		
(c) City, State, and ZIP Code AUSTIN TX 78711		

*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 MURKOWSKI, LISA, , ,  <i>[Electronically Filed]</i>	Date 09/30/2021
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**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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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)

**2021 SENATORS CLASSIC COMMITTEE**

(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 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)

**TAKE BACK THE SENATE**

(b) Address (number and street)

PO BOX 9891

(c) City, State, and ZIP Code

ARLINGTON VA 22219

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)

**FRIENDS OF MITT JOINT FUNDRAISING COMMITTEE**

(b) Address (number and street)

C/O RED CURVE SOLUTIONS  
138 CONANT STREET, SECOND FLOOR

(c) City, State, and ZIP Code

BEVERLY MA 01915

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)

**RECLAIMING THE MAJORITY**

(b) Address (number and street)

228 S WASHINGTON ST.  
STE. 115

(c) City, State, and ZIP Code

ALEXANDRIA VA 22314