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FEC FORM 2

STATEMENT OF CANDIDACY

_										
1.	(a) Name of Candidate (in full) MORRISEY, PATRICK MR,									
	(b) Address (number and street) PO BOX 1005		check if addres	ss changed		2. Candidate's FE0	C Identific	cation N	lumb	er
	(c) City, State, and ZIP Code					3. Is This	New			Amended
	CHARLESTOWN	- au	W۱	/ 25414		Statement	(N)	OR	×	(A)
4.	Party Affiliation REPUBLICAN PARTY	5. Office Soug Senate			6. State & Dist	rict of Candidate 00				
				INCIPAL	CAMPAIGI	I COMMITTEE				
7.	I hereby designate the following n	amed political co	mmittee as m	y Principal C	Campaign Com		18 of election	_ electi	on(s).	
	NOTE: This designation should be	e filed with the ap	propriate offic	ce listed in th	ne instructions.	() 54. 5	. 0.00	• /		
	(a) Name of Committee (in full) MORRISEY FOR \$	SENATE II	NC							
	(b) Address (number and street) PO BOX 1005									
	(c) City, State, and ZIP Code									
	CHARLES TOWN				WV	25414				
8.	I hereby authorize the following na candidacy. NOTE: This designation should be (a) Name of Committee (in full)	(amed committee	Including Join	t Fundraisin	g Representativ al campaign cor	,		d funds	on b	ehalf of my
	WINSOME LEADE	RS I								
	(b) Address (number and street) 901 N WASHINGTON ST SU	JITE 700								
	(c) City, State, and ZIP Code									
	ALEXANDRIA				VA	22314				
	I certify that I have ex	kamined this Sta	tement and to	the best of I	my knowledge a	nd belief it is true, co	orrect and	l compl	ete.	
	ignature of Candidate					Date				•
M	ORRISEY, PATRICK, , MR.,			[Elect	ronically Filed]	11/15/2018				
NO	OTE: Submission of false, erroneou	s, or incomplete	information m	nay subject tl	ne person signi	g this Statement to p	penalties	of 2 U.	S.C. §	§437g.
		1								

FEC FORM 2 (REV. 02/2009)

Optional Supplemental Page for Designation of Additional Authorized Committees

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8.	I hereby authorize the following named committee, which is NOT my principal ca candidacy. NOTE: This designation should be filed with the principal campaign of		mittee, to receive and expend funds on behalf of my
	(a) Name of Committee (in full)		
	STRENGTHEN THE SENATE MAJORITY 2018		
	(b) Address (number and street) PO BOX 9891		
	(c) City, State, and ZIP Code		
	ARLINGTON	A	22219
8.	I hereby authorize the following named committee, which is NOT my principal ca candidacy. NOTE : This designation should be filed with the principal campaign of the committee.		nmittee, to receive and expend funds on behalf of my
	(a) Name of Committee (in full) PROTECT THE SENATE MAJORITY COMMITTEE	E	
	(b) Address (number and street) 824 S MILLEDGE AVE STE 101		
	(c) City, State, and ZIP Code		
	ATHENS GA	\	30605
8.	8. I hereby authorize the following named committee, which is NOT my principal ca candidacy. NOTE: This designation should be filed with the principal campaign of (a) Name of Committee (in full) CONSERVATIVE FIGHTER FUND		amittee, to receive and expend funds on behalf of my
	(b) Address (number and street) C/O RED CURVE SOLUTIONS		
	138 CONANT STREET, 2ND FLOOR		
	(c) City, State, and ZIP Code		
	BEVERLY MA	C	01915
8.	 I hereby authorize the following named committee, which is NOT my principal ca candidacy. NOTE: This designation should be filed with the principal campaign of 		nmittee, to receive and expend funds on behalf of my
	(a) Name of Committee (in full)		
	KEEP THE SENATE RED 2018		
	(b) Address (number and street) 228 S WASHINGTON STREET		
	SUITE 115		
	(c) City, State, and ZIP Code		
	ALEXANDRIA VA	. :	22314

Optional Supplemental Page for Designation of Additional Authorized Committees

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8.	 I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campaign 		nmittee, to receive and expend funds on behalf of my
	(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
8.	 I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campaigr 		nmittee, to receive and expend funds on behalf of my
	(a) Name of Committee (in full)		
	WEST VIRGINIA VICTORY FUND		
	(b) Address (number and street) 228 S. WASHINGTON ST.		
	STE. 115		
	(c) City, State, and ZIP Code		00044
	ALEXANDRIA \	/A	22314
8.	i. I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campaign (a) Name of Committee (in full) WINSOME LEADERS II		nmittee, to receive and expend funds on behalf of my
	(b) Address (number and street) 901 N WASHINGTON ST SUITE 700		
	(c) City, State, and ZIP Code		
	ALEXANDRIA V.	A :	22314
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE : This designation should be filed with the principal campaign		nmittee, to receive and expend funds on behalf of my
	(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	ΘA	30605

Optional Supplemental Page for Designation of Additional Authorized Committees

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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) FOUNDERS COMMITTEE; THE	
	(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) STRENGTHEN THE SENATE MAJORITY 2018	
	(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) PROTECT THE SENATE MAJORITY COMMITTEE	
	(b) Address (number and street) 824 S MILLEDGE AVE STE 101	
	(c) City, State, and ZIP Code ATHENS GA 30605	
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) CONSERVATIVE FIGHTER FUND	
	(b) Address (number and street) C/O RED CURVE SOLUTIONS 138 CONANT STREET, 2ND FLOOR	
	(c) City, State, and ZIP Code BEVERLY MA 01915	

Optional Supplemental Page for Designation of Additional Authorized Committees

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8.	I hereby authorize the following named committee, which is No candidacy. NOTE : This designation should be filed with the pr		•	′
	(a) Name of Committee (in full)			
	KEEP THE SENATE RED 2018			
	(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 No candidacy. NOTE : This designation should be filed with the pr		•	,
	(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	
8.	I hereby authorize the following named committee, which is No candidacy. NOTE: This designation should be filed with the properties (a) Name of Committee (in full) WEST VIRGINIA VICTORY FUND		•	, -
	(b) Address (number and street) 228 S. WASHINGTON ST.			_
	STE. 115			
	(c) City, State, and ZIP Code			
	ALEXANDRIA	VA	22314	
8.	I hereby authorize the following named committee, which is NO candidacy. NOTE : This designation should be filed with the pr		•	,
	(a) Name of Committee (in full)			-
	WINSOME LEADERS II			
	(b) Address (number and street) 901 N WASHINGTON ST SUITE 700			_
	(c) City, State, and ZIP Code			_
	ALEXANDRIA	VA	22314	

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

	(including Joint Fundralsing 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)
	GROWING OUR SENATE MAJORITY
	(b) Address (number and street) 824 S MILLEDGE AVE STE 101
	(c) City, State, and ZIP Code
	ATHENS GA 30605
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.	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.	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