

Image# 201811159133685077

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) <b>MORRISEY, PATRICK MR, , ,</b>			2. Candidate's FEC Identification Number <b>S8WV00143</b>	
(b) Address (number and street) <b>PO BOX 1005</b>		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code <b>CHARLESTOWN WV 25414</b>		3. Is This Statement <input type="checkbox"/> New (N) <b>OR</b> <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation <b>REPUBLICAN PARTY</b>	5. Office Sought <b>Senate</b>	6. State & District of Candidate <b>WV 00</b>		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) <b>MORRISEY FOR SENATE INC</b>		
(b) Address (number and street) <b>PO BOX 1005</b>		
(c) City, State, and ZIP Code <b>CHARLES TOWN WV 25414</b>		

### 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) <b>WINSOME LEADERS I</b>		
(b) Address (number and street) <b>901 N WASHINGTON ST SUITE 700</b>		
(c) City, State, and ZIP Code <b>ALEXANDRIA VA 22314</b>		

*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 <b>MORRISEY, PATRICK, , MR.,</b>  <i>[Electronically Filed]</i>	Date <b>11/15/2018</b>
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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)

**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

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)

**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

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)

**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 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)

**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 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 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 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

Optional Supplemental Page for Designation  
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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)

**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

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(Including Joint Fundraising Representatives)

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(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 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)

**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 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)

**WEST VIRGINIA VICTORY FUND**

(b) Address (number and street)

228 S. WASHINGTON ST.  
STE. 115

(c) City, State, and ZIP Code

ALEXANDRIA

VA

22314

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(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

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(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code

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(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