FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 2

| 1. (a) Name of Candidate (in full) GREITENS, ERIC, , , | | | | | | | |
|---|-------------------------------|----------------|-------------------|---|---------------------------|--------------------|---------------------|
| (b) Address (number and street) PO BOX 218 | | | | 2. Candidate's FEC Identification Number S2MO00536 | | | |
| | | | | | | | |
| (c) City, State, and ZIP Code WARRENTON | М | D 6338 | 3 | 3. Is This Stater | | | Amended (A) |
| 4. Party Affiliation | 5. Office Sought | | 6. State & Dist | rict of Candi | date | | |
| REPUBLICAN PARTY | Senate | | MO | 00 | | | |
| DE | SIGNATION OF PR | INCIPAL | CAMPAIGN | | ITTEE | | |
| 7. I hereby designate the following nar | ned political committee as n | ny Principal (| Campaign Comn | nittee for the | 2022 (year of election | election(s) on) | |
| NOTE: This designation should be f | iled with the appropriate off | ce listed in t | ne instructions. | | | | |
| (a) Name of Committee (in full) GREITENS FOR US | S SENATE | | | | | | |
| (b) Address (number and street) PO BOX 218 | | | | | | | |
| (c) City, State, and ZIP Code | | | | | | | |
| WARRENTON | | | МО | 63383 | 3 | | |
| 8. I hereby authorize the following name candidacy. NOTE: This designation should be f (a) Name of Committee (in full) MAGASEVEN JFC | | | | nmittee, to re | eceive and expe | end funds on b | behalf of my |
| | | | | | | | |
| (b) Address (number and street) 2200 WILSON BLVD | | | | | | | |
| STE 102 NUM 214 | | | | | | | |
| (c) City, State, and ZIP Code | | | | | | | |
| ARLINGTON | | | VA | 22201 | | | |
| l certify that I have exa | mined this Statement and to | o the best of | my knowledge a | nd belief it is | s true, correct a | nd complete. | |
| Signature of Candidate | | | | Date | | | |
| GREITENS, ERIC, , , | | [Elec | tronically Filed] | 10/18/20 | 22 | | |
| NOTE: Submission of false, erroneous, | or incomplete information r | nay subject t | he person signir | ng this State | ment to penaltie | es of 2 U.S.C. | §437g. |
| | | | | | | | |
| | | | | | | | |
| | | | | | | FEC FOR | RM 2 (REV. 02/2009) |

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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) | | | |
|---|----|-------|--|
| THE G TEAM | | | |
| (b) Address (number and street) PO BOX 218 | | | |
| (c) City, State, and ZIP Code WARRENTON | МО | 63383 | |

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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

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(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code