

Image# 202211189546828085

FEC FORM 2

STATEMENT OF CANDIDACY

| | | | | |
|---|---------------------------|--|---|--|
| 1. (a) Name of Candidate (in full) WESTERMAN, BRUCE, , , | | | 2. Candidate's FEC Identification Number H4AR04048 | |
| (b) Address (number and street) P.O. BOX 21097 | | <input type="checkbox"/> Check if address changed | | |
| (c) City, State, and ZIP Code HOT SPRINGS AR 71901 | | 3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A) | | |
| 4. Party Affiliation REPUBLICAN PARTY | 5. Office Sought House | 6. State & District of Candidate AR 04 | | |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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) WESTERMAN FOR CONGRESS | | |
| (b) Address (number and street) PO BOX 21097 | | |
| (c) City, State, and ZIP Code HOT SPRINGS AR 71903 | | |

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) SAM GRAVES LEADERSHIP FUND | | |
| (b) Address (number and street) 2345 GRAND, 18TH FLOOR | | |
| (c) City, State, and ZIP Code KANSAS CITY MO 64108 | | |

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 WESTERMAN, BRUCE, , , [Electronically Filed] | Date 11/18/2022 |
|---|--------------------|

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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|--|--|--|--|--|--|--|--|--|
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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)

WESTERMAN VICTORY FUND

(b) Address (number and street)
PO BOX 21097

(c) City, State, and ZIP Code

HOT SPRINGS AR 71903

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