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#### FEC FORM 2

#### STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
	Casey, Robert, P., , Jr.									
	(b) Address (number and street) PO Box 58746	□C	heck if addre	ss changed		2. Candida S6PA	ate's FEC Ider 00217	ntification N	umber	
	(c) City, State, and ZIP Code					3. Is This	s Ne	ew		Amended
	Philadelphia		P.A	1910	2	Stater	nent (N	) OR	×	(A)
4.	Party Affiliation	5. Office Soug	ht		6. State & Dis	trict of Candi	date			
	DEMOCRATIC PARTY	Senate			PA					
	D	ESIGNATIO	N OF PR	INCIPAL	CAMPAIG	N COMM	ITTEE			
7.	I hereby designate the following n	amed political co	mmittee as m	ny Principal	Campaign Com	mittee for the	2024 (year of elec	election)	on(s).	
	NOTE: This designation should be	e filed with the ap	propriate offi	ce listed in t	he instructions.					
	(a) Name of Committee (in full)									
	Bob Casey for Sen	ate Inc								
	(b) Address (number and street)									
	PO Box 58746									
	(c) City, State, and ZIP Code									
	Philadelphia				PA	19102	2			
	D	ESIGNATIO			THORIZED ng Representation		TEES			
8.	I hereby authorize the following na candidacy.	amed committee,	which is NO	Γ my princip	al campaign co	mmittee, to re	eceive and exp	oend funds	on beh	alf of my
	NOTE: This designation should be	filed with the pri	ncipal campa	ign committ	ee.					
	(a) Name of Committee (in full)									
	Casey Keystone V	ictory Fund	t							
	(b) Address (number and street)									
	PO Box 58746									
	(c) City, State, and ZIP Code									
	Philadelphia				PA	19102	!			
	I certify that I have ea	camined this Stat	ement and to	the best of	my knowledge a	and belief it is	s true, correct	and compl	ete.	
Si	gnature of Candidate					Date				<del></del>
C	asey, Robert, P., , Jr.					07/10/20	24			
N	OTE: Submission of false, erroneou	s, or incomplete	information n	nay subject	the person signi	ing this State	ment to penal	ties of 2 U.S	S.C. §4	37g.

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 campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.						
	(a) Name of Committee (in full)						
	Senate PA & NV						
	(b) Address (number and street)						
	600 Pennsylvania Ave SE						
	#15180 (c) City, State, and ZIP Code						
	Washington	DC	20003				
8.	I hereby authorize the following named committee, which is NOT my pri	ncipal campaign	committee, to receive and expend funds on behalf of my	v			
Ο.	candidacy. <b>NOTE</b> : This designation should be filed with the principal ca			,			
	(a) Name of Committee (in full)			_			
	The Liftoff Fund						
	(b) Address (number and street)			_			
	600 Pennsylvania Ave SE						
	#15180 (c) City, State, and ZIP Code			_			
	(o) only, otato, and En oodo		20003				
	Washington	DC	20003				
	Washington	DC	20003				
8.	I hereby authorize the following named committee, which is NOT my pri candidacy. NOTE: This designation should be filed with the principal ca  (a) Name of Committee (in full)  Ohio Pennsylvania Victory 2024	ncipal campaign	committee, to receive and expend funds on behalf of my	у —			
8.	I hereby authorize the following named committee, which is NOT my pri candidacy. NOTE: This designation should be filed with the principal ca  (a) Name of Committee (in full)  Ohio Pennsylvania Victory 2024  (b) Address (number and street)	ncipal campaign	committee, to receive and expend funds on behalf of my	y 			
8.	I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal ca  (a) Name of Committee (in full)  Ohio Pennsylvania Victory 2024  (b) Address (number and street) 600 Pennsylvania Ave SE	ncipal campaign	committee, to receive and expend funds on behalf of my	y _			
8.	I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal care.  (a) Name of Committee (in full)  Ohio Pennsylvania Victory 2024  (b) Address (number and street) 600 Pennsylvania Ave SE #15180	ncipal campaign	committee, to receive and expend funds on behalf of my	y 			
8.	I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal ca  (a) Name of Committee (in full)  Ohio Pennsylvania Victory 2024  (b) Address (number and street) 600 Pennsylvania Ave SE	ncipal campaign	committee, to receive and expend funds on behalf of my	y 			
	I hereby authorize the following named committee, which is NOT my pri candidacy. NOTE: This designation should be filed with the principal cate.  (a) Name of Committee (in full)  Ohio Pennsylvania Victory 2024  (b) Address (number and street) 600 Pennsylvania Ave SE #15180  (c) City, State, and ZIP Code	ncipal campaign impaign committe  DC  ncipal campaign	committee, to receive and expend funds on behalf of my ee.  20003  committee, to receive and expend funds on behalf of my	_			
	I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal cardian (a) Name of Committee (in full)  Ohio Pennsylvania Victory 2024  (b) Address (number and street) 600 Pennsylvania Ave SE  #15180 (c) City, State, and ZIP Code Washington  I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal cardial Name of Committee (in full)	ncipal campaign impaign committe  DC  ncipal campaign	committee, to receive and expend funds on behalf of my ee.  20003  committee, to receive and expend funds on behalf of my	_			
	I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal car.  (a) Name of Committee (in full)  Ohio Pennsylvania Victory 2024  (b) Address (number and street) 600 Pennsylvania Ave SE  #15180  (c) City, State, and ZIP Code Washington  I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal car.  (a) Name of Committee (in full)  NV PA Victory Fund	ncipal campaign impaign committe  DC  ncipal campaign	committee, to receive and expend funds on behalf of my ee.  20003  committee, to receive and expend funds on behalf of my	_			
	I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy. Note: This designation should be filed with the principal cardiacy.	ncipal campaign impaign committe  DC  ncipal campaign	committee, to receive and expend funds on behalf of my ee.  20003  committee, to receive and expend funds on behalf of my	_			
	I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal car.  (a) Name of Committee (in full)  Ohio Pennsylvania Victory 2024  (b) Address (number and street) 600 Pennsylvania Ave SE  #15180  (c) City, State, and ZIP Code Washington  I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal car.  (a) Name of Committee (in full)  NV PA Victory Fund  (b) Address (number and street) 611 Pennsylvania Ave SE	ncipal campaign impaign committe  DC  ncipal campaign	committee, to receive and expend funds on behalf of my ee.  20003  committee, to receive and expend funds on behalf of my	_			

# 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 princandidacy. <b>NOTE</b> : This designation should be filed with the principal care			y
	(a) Name of Committee (in full)			
	Wyden Fund for a Senate Majority			
	(b) Address (number and street)			
	600 Pennsylvania Ave SE #15180			
	(c) City, State, and ZIP Code			
	Washington	DC	20003	
8.	I hereby authorize the following named committee, which is NOT my princandidacy. <b>NOTE</b> : This designation should be filed with the principal care			y
	(a) Name of Committee (in full)			_
	Victory NOW for Casey			
	(b) Address (number and street) PO Box 65322			_
	(c) City, State, and ZIP Code			_
	Washington	DC	20035	
8.	I hereby authorize the following named committee, which is NOT my prin candidacy. NOTE: This designation should be filed with the principal car (a) Name of Committee (in full)  Senate IMPACT		•	y —
	(b) Address (number and street) 600 Pennsylvania Ave SE #15180			_
	(c) City, State, and ZIP Code			_
	Washington	DC	20003	
8.	I hereby authorize the following named committee, which is NOT my prin candidacy. NOTE: This designation should be filed with the principal car (a) Name of Committee (in full)			<b>y</b>
	PA-CT Senate Victory			
	(b) Address (number and street) PO Box 65322			_
	(c) City, State, and ZIP Code			_
	Washington	DC	20035	

# 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. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	OH PA WI Victory Fund					
	(b) Address (number and street)					
	600 Pennsylvania Ave SE #15180					
	(c) City, State, and ZIP Code					
	Washington	DC	20003			
_		IOT				
8.	I hereby authorize the following named committee, which is N candidacy. <b>NOTE</b> : This designation should be filed with the p			my		
	(a) Name of Committee (in full)					
	MN PA Victory Fund					
	(b) Address (number and street)					
	611 Pennsylvania Ave SE					
	Num 143 (c) City, State, and ZIP Code					
	Washington	DC	20003			
8.	I hereby authorize the following named committee, which is N candidacy. NOTE: This designation should be filed with the p (a) Name of Committee (in full)  Booker Senate Majority		•	my		
	(b) Address (number and street)					
	600 Pennsylvania Ave SE					
	#15180					
	(c) City, State, and ZIP Code					
	Washington	DC	20003			
8.	I hereby authorize the following named committee, which is N candidacy. <b>NOTE</b> : This designation should be filed with the p			my		
	(a) Name of Committee (in full)					
	Senate Victory MI & PA					
	(b) Address (number and street) 600 Pennsylvania Ave SE					
	#15180					
	#15180 (c) City, State, and ZIP Code					

# 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. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	2024 Senate IMPACT					
	(b) Address (number and street)					
	600 Pennsylvania Ave SE #15180					
	(c) City, State, and ZIP Code					
	Washington	DC	20003			
8.	I hereby authorize the following named committee, which is NOT my princicandidacy. NOTE: This designation should be filed with the principal camp					
	(a) Name of Committee (in full)					
	Schumer Majority Committee					
	(b) Address (number and street) 600 Pennsylvania Ave SE #15180					
	(c) City, State, and ZIP Code					
	Washington	DC	20003			
8.	I hereby authorize the following named committee, which is NOT my princicandidacy. NOTE: This designation should be filed with the principal campoon (a) Name of Committee (in full)  Blue Senate Candidate Fund  (b) Address (number and street)					
	600 Pennsylvania Ave SE #15180					
	(c) City, State, and ZIP Code					
	Washington	DC	20003			
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. <b>NOTE</b> : This designation should be filed with the principal campater (a) Name of Committee (in full)					
	Dem Senate Victory 2024					
	(b) Address (number and street) 611 Pennsylvania Ave SE					
	Suite 143 (c) City, State, and ZIP Code					
	Washington	DC	20003			

# 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 candidacy. <b>NOTE</b> : This designation should be filed with the principal			ny
	(a) Name of Committee (in full)			
	Senate IMPACT Project			
	(b) Address (number and street)			
	600 Pennsylvania Ave SE #15180			
	(c) City, State, and ZIP Code			
	Washington	DC	20003	
8.	I hereby authorize the following named committee, which is NOT my candidacy. <b>NOTE</b> : This designation should be filed with the principal		•	ny
	(a) Name of Committee (in full)			
	Schiff(t) the Senate			
	(b) Address (number and street) 611 Pennsylvania Ave SE Suite 143			
	(c) City, State, and ZIP Code			
	Washington	DC	20003	
8.	I hereby authorize the following named committee, which is NOT my candidacy. NOTE: This designation should be filed with the principal (a) Name of Committee (in full)  Win Senate PA & WI  (b) Address (number and street) 600 Pennsylvania Ave SE #15180			my 
	(c) City, State, and ZIP Code			_
	Washington	DC	20003	
8.	I hereby authorize the following named committee, which is NOT my candidacy. NOTE: This designation should be filed with the principal (a) Name of Committee (in full)  2024 Dem Senate Victory: AZ + MT + PA + (b) Address (number and street)  120 Maryland Ave NE	campaign committe		my —
	(c) City, State, and ZIP Code Washington	DC	20002	
	· · · · · · · · · · · · · · · · · · ·	20	20002	

# Optional Supplemental Page for Designation of Additional Authorized Committees

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	DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)			
8.	ereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my ndidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.			
	(a) Name of Committee (in full)			
	Casey Slotkin Victory Fund			
	(b) Address (number and street)			
	122 C St NW Ste 360			
	(c) City, State, and ZIP Code			
	Washington	DC	20001	
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)  Alsobrooks Casey Victory Fund			
	(b) Address (number and street) 122 C Street NW Suite 360			
	(c) City, State, and ZIP Code Washington	OC .	20001	
8.	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)  PA WI Victory Fund  (b) Address (number and street)			
	611 Pennsylvania Ave SE			
	Ste 143 (c) City, State, and ZIP Code			
		OC .	20003	
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			