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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Nord, Billy, , ,		
(b) Address (number and street) PO Box 8165		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Saint Paul		MN 55108
4. Party Affiliation DEMOCRATIC-FARM-LABOR		5. Office Sought Senate
		6. State & District of Candidate MN 00
3. Is This Statement <input checked="" type="checkbox"/> New (N) <input type="checkbox"/> OR <input type="checkbox"/> Amended (A)		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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)

Billy Nord For Minnesota

(b) Address (number and street)

PO Box 8165

(c) City, State, and ZIP Code

Saint Paul

MN 55108

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) Address (number and street)

(c) City, State, and ZIP Code

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 <i>Nord, Billy, , ,</i>	Date <u>04/01/2025</u>
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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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