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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) SCHMITT, ERIC, , ,		
(b) Address (number and street) 101 W ARGONNE DR, #24		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code SAINT LOUIS MO 63122		2. Candidate's FEC Identification Number S2MO00544
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought Senate
6. State & District of Candidate MO 00		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" 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 2028 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) SCHMITT FOR SENATE		
(b) Address (number and street) 101 W ARGONNE DR, #24		
(c) City, State, and ZIP Code SAINT LOUIS MO 63122		

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) WINNING FOR AMERICA FUND		
(b) Address (number and street) 101 W ARGONNE DR #24		
(c) City, State, and ZIP Code SAINT LOUIS MO 63122		

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 SCHMITT, ERIC, , ,	Date 09/18/2025
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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)

Page 2 of 2DESIGNATION 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)

RICKETTS-SCHMITT VICTORY FUND

(b) Address (number and street)

101 W ARGONNE DR NUM 24

(c) City, State, and ZIP Code

SAINT LOUIS

MO

63122

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)

SUCCESS FOR THE FUTURE FUND

(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)

(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