## FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full)					
Warner, Mark, Robert, ,					
(b) Address (number and street) 201 North Union St	□ Check if address changed		2. Candidate's FEC Identification Number S6VA00093		
Suite 300 (c) City, State, and ZIP Code				3. Is This New	Amended
Alexandria	V	A 2231	4	Statement (N) OR	× (A)
4. Party Affiliation	5. Office Sought		6. State & Distr	rict of Candidate	
DEMOCRATIC PARTY	Senate		VA		
<ul> <li>D</li> <li>7. I hereby designate the following n</li> <li>NOTE: This designation should be</li> </ul>		ny Principal (	Campaign Comm	2222	n(s).
(a) Name of Committee (in full)					
Friends of Mark Wa	arner				
(b) Address (number and street) 611 Pennsylvania Ave SE Num 143					
(c) City, State, and ZIP Code					
Washington			DC	20003	
<ul> <li>8. I hereby authorize the following na candidacy.</li> <li>NOTE: This designation should be (a) Name of Committee (in full)</li> <li>One Virginia Fund</li> <li>(b) Address (number and street)</li> <li>611 Pennsylvania Ave SE</li> <li>Num 143</li> <li>(c) City, State, and ZIP Code</li> <li>Washington</li> </ul>				20003	
l certify that I have e	camined this Statement and to	o the best of	my knowledge a	nd belief it is true, correct and comple	te.
Signature of Candidate				Date	
-			Date		
Warner, Mark, R., ,				06/06/2024	
NOTE: Submission of false, erroneou	s, or incomplete information r	may subject t	he person signin	ng this Statement to penalties of 2 U.S	
		1		1 1	.C. §437g.
					.C. §437g.
				FEC	.C. §437g.