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FEC FORM 2

STATEMENT OF CANDIDACY

							_		
1.	(a) Name of Candidate (in full)								
	Hoeven, John, , ,					1			
	(b) Address (number and street) PO BOX 861	☐ Check if address changed		d	Candidate's FEC Identification Number S0ND00093				
	(c) City, State, and ZIP Code					3. Is This New Amended	_		
	BISMARCK		NI	585	02	Statement (N) OR (A)			
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	rict of Candidate	_		
	REPUBLICAN PARTY	Senate			ND		_		
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2028 (year of election)								
	NOTE: This designation should be f	iled with the ap	propriate off	ice listed in	the instructions.				
	(a) Name of Committee (in full) HOEVEN FOR SEN	IATE							
	(b) Address (number and street) PO BOX 861						_		
	(c) City, State, and ZIP Code						_		
	BISMARCK				ND	58502			
Ω	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								
0.	candidacy.	ied committee,	WINGIT IS INC	Tilly plille	pai campaign con	minitiee, to receive and expend funds on behalf of my			
	NOTE: This designation should be f	iled with the pri	ncipal campa	aign comm	ttee.				
	(a) Name of Committee (in full) HOEVEN VICTORY COMMITTEE								
	(b) Address (number and street) 228 S WASHINGTON ST STE	: 115					_		
	(c) City, State, and ZIP Code						_		
	ALEXANDRIA				VA	22314			
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.									
Si	gnature of Candidate					Date			
H	oeven, John, , ,			[Ele	ctronically Filed]	11/09/2022			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									
							_		

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

	(Including Joint Fundraising F	Representativ	es)					
3.	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)							
	CORNYN VICTORY COMMITTEE							
	(b) Address (number and street) PO BOX 13026							
	(c) City, State, and ZIP Code							
	AUSTIN	ΤX	78711					
3.	B. I hereby authorize the following named committee, which is NOT my principal c candidacy. NOTE: This designation should be filed with the principal campaign	nmittee, to receive and expend funds on behalf of my						
	(a) Name of Committee (in full)							
	TEAM MCCONNELL							
	(b) Address (number and street)							
	228 S WASHINGTON STREET STE 115							
	(c) City, State, and ZIP Code							
	ALEXANDRIA V.	A	22314					
3.	I hereby authorize the following named committee, which is NOT my principal c	ampaign com	nmittee, to receive and expend funds on behalf of my					
	candidacy. NOTE: This designation should be filed with the principal campaign		•					
	(a) Name of Committee (in full)							
	TAKE BACK THE SENATE							
	(b) Address (number and street)							
	PO BOX 9891							
	(c) City, State, and ZIP Code							
	ARLINGTON	۸ 2	22219					
3.	B. I hereby authorize the following named committee, which is NOT my principal c candidacy. NOTE: This designation should be filed with the principal campaign		nmittee, to receive and expend funds on behalf of my					
	(a) Name of Committee (in full)							
	2022 SENATORS CLASSIC COMMITTEE							
	(b) Address (number and street)							
	228 S WASHINGTON STREET STE 115							
	(c) City, State, and ZIP Code							
	ALEXANDRIA V.	A	22314					