

Image# 202012149374379352

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Rounds, Mike, , ,			2. Candidate's FEC Identification Number S4SD00049	
(b) Address (number and street) PO Box 250		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Pierre SD 57501-0250		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	6. State & District of Candidate SD 00		

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) Rounds for Senate		
(b) Address (number and street) PO Box 250		
(c) City, State, and ZIP Code Pierre SD 57501-0250		

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) The Founders Committee		
(b) Address (number and street) 1305 W 11th Street #213		
(c) City, State, and ZIP Code Houston TX 77008		

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 Rounds, Mike, , , <i>[Electronically Filed]</i>	Date 12/14/2020
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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)

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)

Rounds-SDGOP Victory Fund

(b) Address (number and street)

109 S. Pierre St.

(c) City, State, and ZIP Code

Pierre

SD

57501-2418

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)

The Victory Club

(b) Address (number and street)

PO Box 60148

(c) City, State, and ZIP Code

Washington

DC

20039-0148

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