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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Madigan, Thomas, John, Mr.,			2. Candidate's FEC Identification Number S4MT00167		
(b) Address (number and street) 750 Nottingham circle #5 5			☐ Check if address changed		
(c) City, State, and ZIP Code Billings MT 59105			3. Is This Statement ☒ New (N) OR ☐ Amended (A)		
4. Party Affiliation Rep		5. Office Sought Senate		6. State & District of Candidate MT 00	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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) Madigan4montanans		
(b) Address (number and street) Po box 51026 710 wicks lane		
(c) City, State, and ZIP Code Billings MT 59105		

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 Madigan, Thomas, John, , [Electronically Filed]	Date 09/18/2021
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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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