Image# 202407239665718367 PAGE 1 / 2

FEC FORM 2

STATEMENT OF CANDIDACY

_								
1.	(a) Name of Candidate (in full)							
	Kennedy, Robert, F. Jr., Shanahan, Nicole, , ,							
	(b) Address (number and street) 600 W Broadway Ste 1400	☐ Check if address changed				Candidate's FEC Identification Number P40011793		
	(c) City, State, and ZIP Code					3. Is This New	Amended	
	San Diego	CA 92101-3377				()	X (A)	
4.	Party Affiliation	5. Office Soug				rict of Candidate		
	INDEPENDENT	President	ial		ZZ	00		
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE							
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full)							
	Team Kennedy							
	(b) Address (number and street)							
	PO Box 147							
	(c) City, State, and ZIP Code							
	South Walpole				MA	02071-0147		
	D.	CIONATIO	N OF OT	IED ALI		COMMITTEEC		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)								
(morating contributions)								
8.	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)								
Kennedy Victory Fund 2024								
	(b) Address (number and street)							
	PO Box 147							
	(c) City, State, and ZIP Code							
	South Walpole				MA	02071-0147		
	·							
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					Date			
K	Kennedy, Robert, F. Jr., Shanahan, Nicole, , ,					07/23/2024		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								
	OTE: Submission of false, erroneou	s, or incomplete	information m	nay subject t	ne person signi	g this Statement to penalties of 2 U.S.C.	§437g.	
	OTE: Submission of false, erroneou	s, or incomplete	information m	nay subject t	ne person signi	g this Statement to penalties of 2 U.S.C.	§437g.	
	OTE: Submission of false, erroneou	s, or incomplete	information m	nay subject t	ne person signi	g this Statement to penalties of 2 U.S.C.	§437g.	

FEC FORM 2 (REV. 02/2009)

: 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ'G7 < 98 I @ 'CF' + H9 A = N5 H+ CB

Form/Schedule: F2A Transaction ID:

Form/Schedule: Transaction ID: