Image# 202407169661187395 PAGE 1 / 4

#### FEC FORM 2

#### STATEMENT OF CANDIDACY

							=
1.	(a) Name of Candidate (in full)						
	Buckhout, Laurie, , ,		Nagali if			2. Condidate a FFO Identification Number	_
	(b) Address (number and street) PO Box 97275		check if addre	ss changed		Candidate's FEC Identification Number     H4NC01137	
	(c) City, State, and ZIP Code					3. Is This New Amended	
	Raleigh		NC	2762	4-7275	Statement X (N) OR (A)	
4.	Party Affiliation	5. Office Soug	ght			trict of Candidate	
	REPUBLICAN PARTY	House			NC	01	
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIG	N COMMITTEE	
7.	I hereby designate the following na	med political co	ommittee as m	ny Principal (	Campaign Comr	nittee for the $\frac{2024}{\text{(year of election)}}$ election(s).	
	NOTE: This designation should be	filed with the ap	opropriate offi	ce listed in th	ne instructions.		_
	(a) Name of Committee (in full)						
	LAURIE BUCKHOU	T FOR C	ONGRES	SS			
	(b) Address (number and street)						
	PO Box 97275						
	(c) City, State, and ZIP Code						_
	Raleigh				NC	27624-7275	
							_
	DE	SIGNATIO	N OF OT	HER AU	THORIZED	COMMITTEES	
					g Representativ		
_						•	
	r nereby authorize the following har candidacy.	nea committee	, which is NO	I my principa	ai campaign cor	nmittee, to receive and expend funds on behalf of my	
	NOTE: This designation should be	iled with the pr	incipal campa	nign committe	ee.		
	(a) Name of Committee (in full)						_
	SCALISE LEADER	SHIP FUI	ND 2024				
	(b) Address (number and street)						_
	320 1st St SE						
	(c) City, State, and ZIP Code						_
	Washington				DC	20003-1838	
						20000 1000	
	I certify that I have exa	nmined this Sta	tement and to	the best of	my knowledge a	and belief it is true, correct and complete.	_
Sig	nature of Candidate					Date	-
Ru	ckhout, Laurie, , ,					07/16/2024	
Би	cknoui, Laurie, , ,					07/10/2024	
NO	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)

#### : 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: F2N Transaction ID:

Form/Schedule: Transaction ID:

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 Representatives)

	I hereby authorize the following named committee, which is I candidacy. <b>NOTE</b> : This designation should be filed with the			of my
	(a) Name of Committee (in full)			
	BUCKHOUT FOR CONGRESS-GTM	NF NC01		
	(b) Address (number and street)  228 S WASHINGTON ST  STE 115			
	(c) City, State, and ZIP Code ALEXANDRIA	VA	22314	
8.	I hereby authorize the following named committee, which is I candidacy. <b>NOTE</b> : This designation should be filed with the part of the part			of my
	(a) Name of Committee (in full)			
	NC STRONG BUCKHOUT, HARRIGA	N, KNOTT, MCDO	WELL, MOORE	
	(b) Address (number and street) PO Box 97275			
	(c) City, State, and ZIP Code Raleigh	NC	27624-7275	
8.	I hereby authorize the following named committee, which is I candidacy. <b>NOTE</b> : This designation should be filed with the			of my
	(a) Name of Committee (in full)  GOP WINNING WOMEN 2024			
	OOI WIINING WOMEN 2021			
	(b) Address (number and street) 228 S Washington St			
	228 S Washington St Ste 115			
	228 S Washington St	VA	22314-5404	
8.	228 S Washington St Ste 115 (c) City, State, and ZIP Code	NOT my principal campaign	committee, to receive and expend funds on behalf	of my
8.	228 S Washington St  Ste 115 (c) City, State, and ZIP Code Alexandria  I hereby authorize the following named committee, which is I	NOT my principal campaign	committee, to receive and expend funds on behalf	of my
8.	228 S Washington St  Ste 115 (c) City, State, and ZIP Code Alexandria  I hereby authorize the following named committee, which is I candidacy. NOTE: This designation should be filed with the	NOT my principal campaign	committee, to receive and expend funds on behalf	of my
8.	228 S Washington St Ste 115 (c) City, State, and ZIP Code Alexandria  I hereby authorize the following named committee, which is I candidacy. NOTE: This designation should be filed with the land Name of Committee (in full)  GROW THE MAJORITY  (b) Address (number and street) 228 S Washington St	NOT my principal campaign	committee, to receive and expend funds on behalf	of my
8.	228 S Washington St Ste 115 (c) City, State, and ZIP Code Alexandria  I hereby authorize the following named committee, which is I candidacy. NOTE: This designation should be filed with the part (a) Name of Committee (in full)  GROW THE MAJORITY  (b) Address (number and street)	NOT my principal campaign	committee, to receive and expend funds on behalf	of my

FEC Form 2S (Revised 02/2017)

# Optional Supplemental Page for Designation of Additional Authorized Committees

Page	4	of	4
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**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. <b>NOTE</b> : This designation should be filed with the principal campaign committee.						
	(a) Name of Committee (in full)						
	E-PAC MAJORITY MAKERS						
	(b) Address (number and street) PO Box 500						
	(c) City, State, and ZIP Code  Glens Falls  NY 12801-0500						
8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : 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. <b>NOTE</b> : 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						