Image# 202404159632666411 PAGE 1 / 5

FEC FORM 2

STATEMENT OF CANDIDACY

(a) Name of Candidate (in full)					
Rosen, Jacky, , ,		1-16 11			O Condidatela FFO Idantiff the No.
(b) Address (number and street) PO Box 46110	□Ch	eck if addres	ss changed		Candidate's FEC Identification Number S8NV00156
(c) City, State, and ZIP Code					3. Is This New Amended
Las Vegas		NV	8911		Statement (N) OR (A)
4. Party Affiliation	5. Office Sough	t			trict of Candidate
DEMOCRATIC PARTY	Senate			NV	
DE	SIGNATION	OF PRI	NCIPAL	CAMPAIGI	N COMMITTEE
7. I hereby designate the following nar	med political com	nmittee as m	y Principal	Campaign Comr	mittee for the 2024 (year of election) election(s).
NOTE: This designation should be f	iled with the app	ropriate offic	ce listed in t	he instructions.	
(a) Name of Committee (in full)					
Rosen for Nevada					
(b) Address (number and street)					
PO Box 46110					
(c) City, State, and ZIP Code					
Las Vegas				NV	89114
DE	SIGNATION	OF OT	HER AU	THORIZED	COMMITTEES
				g Representativ	
O I haveby guidaving the following page		uhiah ia NOT			
candidacy.	ied committee, v	WIICH IS NO	тту рттстр	ai campaign coi	mmittee, to receive and expend funds on behalf of my
candidacy.					
NOTE: This designation should be f	iled with the prin	cipal campa	ign committ	ee.	
(a) Name of Committee (in full)					
Jacky Rosen Victor	y Fund				
(b) Address (number and street)					
611 Pennsylvania Ave SE					
Num 143					
(c) City, State, and ZIP Code					
Washington				DC	20003
I certify that I have exa	mined this State	ment and to	the best of	my knowledge a	and belief it is true, correct and complete.
Signature of Candidate					Date
Rosen, Jacky, , ,					04/15/2024
NOTE: Submission of false erroncous	or incomplete in	oformation m	nav subject	the nerson signi	ng this Statement to penalties of 2 U.S.C. §437g.
	, or mooniplete ii		iay sabject	porson signii	ing the Statement to pendines of 2 0.0.0. \$4079.

FEC FORM 2 (REV. 02/2009)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	² of	5
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3.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. NOTE : This designation should be filed with the principal campaign committee.				
	(a) Name of Committee (in full)				
	Women Senators Making History				
	(b) Address (number and street)				
	600 Pennsylvania Ave SE				
	Ste 15180 (c) City, State, and ZIP Code				
	Washington	DC	20003		
	, addining.co.				
3.	I hereby authorize the following named committee, which is N candidacy. NOTE : This designation should be filed with the property of the committee of the candidacy.			expend funds on behalf of my	
	(a) Name of Committee (in full)				
	Nevada Senate Victory 2024				
	(b) Address (number and street) 611 Pennsylvania Ave SE				
	Suite 143				
	(c) City, State, and ZIP Code				
	Washington	DC	20003		
3.	I hereby authorize the following named committee, which is N candidacy. NOTE : This designation should be filed with the proof (a) Name of Committee (in full)			expend funds on behalf of my	
	Blue Senate Candidate Fund				
	(b) Address (number and street) 600 Pennsylvania Ave SE #15180				
	(c) City, State, and ZIP Code				
	Washington	DC	20003		
3.	I hereby authorize the following named committee, which is N candidacy. NOTE : This designation should be filed with the pr			expend funds on behalf of my	
	(a) Name of Committee (in full)				
	Senate PA & NV				
	(b) Address (number and street) 600 Pennsylvania Ave SE #15180				
	(c) City, State, and ZIP Code				
	Washington	DC	20003		

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	3 of 5	
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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)			_	
	Senate IMPACT 2024				
	(b) Address (number and street)				
	600 Pennsylvania Ave SE #15180				
	(c) City, State, and ZIP Code			-	
	Washington	DC	20003		
8.	I hereby authorize the following named committee, which is NOT my princandidacy. NOTE : This designation should be filed with the principal cam				
	(a) Name of Committee (in full)				
	Cantwell Klobuchar Rosen 2024 State Victory	Fund			
	(b) Address (number and street) 401 2nd Ave S Ste 303				
	(c) City, State, and ZIP Code				
	Seattle	WA	98104		
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal candidacy. Name of Committee (in full) The Liftoff Fund				
	(b) Address (number and street) 600 Pennsylvania Ave SE #15180				
	(c) City, State, and ZIP Code				
	Washington	DC	20003		
8.	I hereby authorize the following named committee, which is NOT my prince candidacy. NOTE : This designation should be filed with the principal care				
	(a) Name of Committee (in full)				
	314 Action Impact Slate				
	(b) Address (number and street) PO Box 14560				
	(c) City, State, and ZIP Code				
	Washington	DC	20044		

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	4 of 5	
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8.	I hereby authorize the following named committee, which is NOT my princip candidacy. NOTE : This designation should be filed with the principal campa		
	(a) Name of Committee (in full)		
	NV PA Victory Fund		
	(b) Address (number and street)		
	611 Pennsylvania Ave SE Suite 143		
	(c) City, State, and ZIP Code		
	Washington	DC	20003
8.	I hereby authorize the following named committee, which is NOT my princip candidacy. NOTE : This designation should be filed with the principal campa		
	(a) Name of Committee (in full)		
	MN NV WA WI Victory		
	(b) Address (number and street) 600 Pennsylvania Ave SE #15180		
	(c) City, State, and ZIP Code		
	Washington	DC	20003
8.	I hereby authorize the following named committee, which is NOT my princip candidacy. NOTE : This designation should be filed with the principal campa (a) Name of Committee (in full)		
	Justice 2024		
	(b) Address (number and street)		
	600 Pennsylvania Ave SE		
	#15180 (c) City, State, and ZIP Code		
	Washington	DC	20003
8.	I hereby authorize the following named committee, which is NOT my princip candidacy. NOTE : This designation should be filed with the principal campa (a) Name of Committee (in full)		
	Three for the Majority		
	(b) Address (number and street) 600 Pennsylvania Ave SE #15180		
	(c) City, State, and ZIP Code		
	Washington	DC	20003

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	5 of 5	
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8.	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)				
	Majority 2024				
	(b) Address (number and street)				
	PO Box 65322				
	(c) City, State, and ZIP Code				
	Washington	DC	20035		
8.	I hereby authorize the following named committee, which candidacy. NOTE : This designation should be filed with t			unds on behalf of my	
	(a) Name of Committee (in full)				
	MT NV Victory Fund				
	(b) Address (number and street)				
	611 Pennsylvania Ave SE Suite 143				
	(c) City, State, and ZIP Code				
	Washington	DC	20003		
8.	I hereby authorize the following named committee, which candidacy. NOTE : This designation should be filed with to (a) Name of Committee (in full)			unds on behalf of my	
	2024 Green Senate				
	(b) Address (number and street)				
	120 Maryland Ave NE				
	120 Maryland Ave NE (c) City, State, and ZIP Code				
		DC	20002		
8.	(c) City, State, and ZIP Code	n is NOT my principal campaign o	committee, to receive and expend for	unds on behalf of my	
8.	(c) City, State, and ZIP Code Washington I hereby authorize the following named committee, which candidacy. NOTE: This designation should be filed with the committee of the committee of the candidacy.	n is NOT my principal campaign o	committee, to receive and expend for	unds on behalf of my	