

Image# 202406199649239411

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Brown, Sam, , ,			2. Candidate's FEC Identification Number S2NV00308	
(b) Address (number and street) PO Box 750844		<input checked="" type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Las Vegas		NV 89136	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 NV 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) SAM BROWN FOR NEVADA		
(b) Address (number and street) PO BOX 750844		
(c) City, State, and ZIP Code LAS VEGAS NV 89136		

### 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) MAJORITY MAKERS FUND		
(b) Address (number and street) 421 OFFICE PARK DR		
(c) City, State, and ZIP Code MOUNTAIN BROOK AL 35223		

*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 Brown, Sam, , ,	Date 06/19/2024
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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)

**2024 REPUBLICAN SENATE VICTORY**

(b) Address (number and street)

228 S. WASHINGTON STREET  
SUITE 115

(c) City, State, and ZIP Code

ALEXANDRIA VA 22314

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)

**2024 THUNE REPUBLICAN SENATE VICTORY**

(b) Address (number and street)

228 S. WASHINGTON STREET  
SUITE 115

(c) City, State, and ZIP Code

ALEXANDRIA VA 22314

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)

**SAM BROWN VICTORY COMMITTEE**

(b) Address (number and street)

PO BOX 751271

(c) City, State, and ZIP Code

LAS VEGAS NV 89136

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)

**SAM BROWN VICTORY FUND**

(b) Address (number and street)

3275 N FORT APACHE #150

(c) City, State, and ZIP Code

LAS VEGAS NV 89129

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)

**BROWN/ROGERS VICTORY FUND**

(b) Address (number and street)

3275 NORTH FORT APACHE ROAD  
150

(c) City, State, and ZIP Code

LAS VEGAS NV 89129

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 PATH TO VICTORY 2024**

(b) Address (number and street)

421 OFFICE PARK DR

(c) City, State, and ZIP Code

BIRMINGHAM AL 35223

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)

**2024 SENATORS CLASSIC COMMITTEE**

(b) Address (number and street)

228 S. WASHINGTON STREET  
SUITE 115

(c) City, State, and ZIP Code

ALEXANDRIA VA 22314

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)

**RECLAIM THE MAJORITY**

(b) Address (number and street)

421 Office Park Dr

(c) City, State, and ZIP Code

Mountain Brook AL 35223

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)

**BROWN/ROGERS VICTORY FUND**

(b) Address (number and street)

3275 NORTH FORT APACHE ROAD  
150

(c) City, State, and ZIP Code

LAS VEGAS NV 89129

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)

**CORNYN VICTORY COMMITTEE**

(b) Address (number and street)

PO Box 13026

(c) City, State, and ZIP Code

Austin TX 78711

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)

**TILLIS AND COLLEAGUES VICTORY COMMITTEE**

(b) Address (number and street)

228 S. WASHINGTON STREET

(c) City, State, and ZIP Code

ALEXANDRIA VA 22314

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)

**BROWN FOR NV SENATE REPUBLICAN NOMINEE FUND 2024**

(b) Address (number and street)

PO BOX 9891

(c) City, State, and ZIP Code

ARLINGTON VA 22219