

Image# 202607109874853434

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Sununu, John, E, ,		
(b) Address (number and street) PO Box 1617		☐ Check if address changed
(c) City, State, and ZIP Code Hampton NH 03483		2. Candidate's FEC Identification Number S6NH00208
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought Senate
6. State & District of Candidate NH 00		3. Is This Statement ☐ New (N) OR ☒ Amended (A)

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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) Sununu Senator		
(b) Address (number and street) PO Box 1617		
(c) City, State, and ZIP Code Hampton NH 03483		

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) TEAM SUNUNU		
(b) Address (number and street) 824 S. MILLEDGE AVE STE 101		
(c) City, State, and ZIP Code ATHENS GA 30605		

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 Sununu, John, E, ,	Date 07/10/2026
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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 CommitteesPage 2 of 3

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)

AMERICA IS BACK

(b) Address (number and street)

425 2ND ST NE

(c) City, State, and ZIP Code

WASHINGTON

DC

20002

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)

TEAM MORENO

(b) Address (number and street)

P.O. BOX 340797

(c) City, State, and ZIP Code

COLUMBUS

OH

43234

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)

ONE TEAM SENATE MAJORITY

(b) Address (number and street)

421 OFFICE PARK DRIVE

(c) City, State, and ZIP Code

MOUNTAIN BROOK

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)

SUNUNU VICTORY

(b) Address (number and street)

PO BOX 72100

(c) City, State, and ZIP Code

NEWPORT

KY

41072

Optional Supplemental Page for Designation
of Additional Authorized CommitteesPage 3 of 3

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)

SENATE PATH TO VICTORY 2026

(b) Address (number and street)

421 OFFICE PARK DR

(c) City, State, and ZIP Code

MOUNTAIN BROOK

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)

NEW ENGLAND VICTORY FUND

(b) Address (number and street)

824 S. MILLEDGE AVE
STE. 101

(c) City, State, and ZIP Code

ATHENS

GA

30605

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)

2026 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)

MAINTAIN THE MAJORITY

(b) Address (number and street)

16714 FITZHUGH ROAD

(c) City, State, and ZIP Code

DRIPPING SPRINGS

TX

78620