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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full) MCCORMICK, DAVE, , ,					
	(b) Address (number and street)	□С	heck if addre	ss changed		2. Candidate's FEC Identification Number
	PO BOX 23537					S2PA00661
	(c) City, State, and ZIP Code PITTSBURGH		P.	1522	22	3. Is This New Amended Statement (N) OR X (A)
4.	Party Affiliation	5. Office Soug	ht			trict of Candidate
	REPUBLICAN PARTY	Senate			PA	00
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIG	N COMMITTEE
7.	I hereby designate the following nar	ned political co	mmittee as n	ny Principal	Campaign Comi	mittee for the $\frac{2024}{\text{(year of election)}}$ election(s).
	NOTE: This designation should be f	iled with the ap	propriate offi	ce listed in t	he instructions.	
	(a) Name of Committee (in full)					
	FRIENDS OF DAVE	MCCOR	MICK			
	(b) Address (number and street)					
	PO BOX 23537					
	(c) City, State, and ZIP Code					
	PITTSBURGH				PA	15222
8.	I hereby authorize the following name candidacy. NOTE: This designation should be formula in the state of th	ned committee,	which is NO	T my princip		mmittee, to receive and expend funds on behalf of my
	(a) Name of Committee (in full)					
	DAVE MCCORMIC	K FOR U	S SENA	TE		
	(b) Address (number and street)					
	PO BOX 23537					
	(c) City, State, and ZIP Code					
	PITTSBURGH				PA	15222
	I certify that I have exa	mined this Stat	ement and to	the best of	mv knowledge a	and belief it is true, correct and complete.
Si	gnature of Candidate					Date
	ICCORMICK, DAVE, , ,					04/26/2024
171	recommen, DAVE, , ,					04/20/2024
N	DTE: Submission of false, erroneous,	or incomplete	information r	nay subject	the person signi	ng this Statement to penalties of 2 U.S.C. §437g.
		1				

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Includina	Joint	Fundraising	Ren	resentativ	es)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on candidacy. NOTE : This designation should be filed with the principal campaign committee.				
	(a) Name of Committee (in full)			
	BATTLEFIELD FUND 2023			
	(b) Address (number and street)			
	228 S WASHINGTON ST STE 115			
	(c) City, State, and ZIP Code			
	ALEXANDRIA	VA	22314	
0	I hereby authorize the following named committee, which is N	IOT my principal campaign o	committee to receive and expend funds on behalf of my	
Ο.	candidacy. NOTE : This designation should be filed with the p			
	(a) Name of Committee (in full)			•
	TEAM MCCORMICK			
	(b) Address (number and street)			
	PO BOX 23537			
	(c) City, State, and ZIP Code			
	PITTSBURGH	PA	15222	
8.	I hereby authorize the following named committee, which is N candidacy. NOTE: This designation should be filed with the p (a) Name of Committee (in full) 2024 REPUBLICAN SENATE VICTORY	rincipal campaign committee		-
	(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 N candidacy. NOTE : This designation should be filed with the p		•	
	(a) Name of Committee (in full)			
	(a) Name of Committee (in full) RECLAIM THE MAJORITY			-
				-
	RECLAIM THE MAJORITY (b) Address (number and street)			-

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)

3. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on be 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		
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)		
	MCCORMICK FOR PA SENATE REPUBLICAN NOMINEE FUND 2024		
	(b) Address (number and street) PO BOX 9891		
	(c) City, State, and ZIP Code ARLINGTON VA 22219		
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) (b) Address (number and street) (c) City, State, and ZIP Code		
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)		
	(b) Address (number and street)		