FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 3

1.	(a) Name of Candidate (in full)					
	Blackburn, Marsha, , Mrs., (b) Address (number and street)		ck if address	changed		2. Candidate's FEC Identification Number
	(b) Address (number and street) 6103 Murray Lane		ck II address	changed		S8TN00337
	(c) City, State, and ZIP Code			0700		3. Is This New Amended Statement (N) OR (A)
	Brentwood		TN	3702	7-6209	
4.	Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate			6. State & Dist	rict of Candidate 00
	DE	SIGNATION	OF PRIN	ICIPAL	CAMPAIGN	
7.	I hereby designate the following nar	ned political comr	nittee as my	Principal (Campaign Comn	nittee for the 2024 election(s). (year of election)
	NOTE: This designation should be f	iled with the appro	opriate office	listed in th	ne instructions.	
	(a) Name of Committee (in full)					
	Marsha for Senate					
	(b) Address (number and street)					
	PO Box 3750					
	(c) City, State, and ZIP Code					
	Brentwood				TN	37024
8.	 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 f					
	(a) Name of Committee (in full)					
	Blackburn Victory F	und				
	(b) Address (number and street) PO Box 3241					
	(c) City, State, and ZIP Code					
	Brentwood				TN	37024
	I certify that I have exa	mined this Stater	nent and to th	he best of	my knowledge a	and belief it is true, correct and complete.
Si	gnature of Candidate					Date
В	lackburn, Marsha, , ,					05/21/2024
NC	DTE: Submission of false, erroneous,	or incomplete info	ormation ma	y subject t	ne person signir	ng this Statement to penalties of 2 U.S.C. §437g.

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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) Blackburn Tennessee Victory Fund				
PO Box 3750				
(c) City, State, and ZIP Code				
Brentwood	TN	37024		

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	ТΧ	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)				
2024 Republican Senate Victory				
(b) Address (number and street) 228 South Washington St				
Ste. 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)		
2023 Senators Classic Committee		
(b) Address (number and street) 228 South Washington St		
Ste. 115		
(c) City, State, and ZIP Code		
Alexandria	VA	22314

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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)					
Barrasso Blackburn Victory Committee					
(b) Address (number and street)					
901 N Washington St					
Ste. 700					
(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)			
Team McConnell			
(b) Address (number and street)			
228 South Washington St			
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)				
Blackburn Cruz Scott Victory				
(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)

(b) Address (number and street)

(c) City, State, and ZIP Code