## FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) COTTON, THOMAS,  (b) Address (number and street) 2226 COTTONDALE LN SUITE 200  (c) City, State, and ZIP Code LITTLE ROCK AR 72202  3. Is This Statement (N) OR  Amend: Statement (N) OR  Amend: Am									
(b) Address (number and street) SUITE 200 (c) City, State, and ZIP Code LITTLE ROCK 4. Party Affiliation REPUBLICAN PARTY 5. Office Sought Senate  DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE 7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election)  NOTE: This designation should be filed with the appropriate office listed in the instructions.  (a) Name of Committee (in full) COTTON FOR SENATE, INC.  (b) Address (number and street) 2226 COTTONDALE LN SUITE 200  (c) City, State, and ZIP Code LITTLE ROCK AR 72202  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.	1.	` '							
2226 COTTONDALE LN SUITE 200  (c) City, State, and ZIP Code LITTLE ROCK  4. Party Affiliation REPUBLICAN PARTY  5. Office Sought Senate  DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE  7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election)  NOTE: This designation should be filled with the appropriate office listed in the instructions.  (a) Name of Committee (in full) COTTON FOR SENATE, INC.  (b) Address (number and street) 2226 COTTONDALE LN SUITE 200  (c) City, State, and ZIP Code LITTLE ROCK  AR 72202  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.		COTTON, THOMAS, , ,							
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COTTON FOR SENATE, INC.  (b) Address (number and street) 2226 COTTONDALE LN SUITE 200  (c) City, State, and ZIP Code LITTLE ROCK  AR 72202  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.			iled with the ap	propriate offic	e listed in the	ne instructions.			
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·						g Representative	es)		
NOTE: This designation should be filed with the principal campaign committee.						g Representative	es)	xpend funds or	n behalf of my
						g Representative	es)	xpend funds or	n behalf of my
(a) Name of Committee (in full)	(	candidacy.	ned committee,	which is NOT	my princip	g Representative	es)	xpend funds or	n behalf of my
COTTON VICTORY		candidacy.  NOTE: This designation should be f	ned committee,	which is NOT	my princip	g Representative	es)	xpend funds or	n behalf of my
		candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)	ned committee,	which is NOT	my princip	g Representative	es)	xpend funds or	n behalf of my
		candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  COTTON VICTORY	ned committee,	which is NOT	my princip	g Representative	es)	xpend funds or	n behalf of my
901 N WASHINGTON STREET		candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  COTTON VICTORY  (b) Address (number and street)	ned committee,	which is NOT	my princip	g Representative	es)	xpend funds or	n behalf of my
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SUITE 700		candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  COTTON VICTORY  (b) Address (number and street)  901 N WASHINGTON STREE  SUITE 700	ned committee,	which is NOT	my princip	g Representative	es)	kpend funds or	n behalf of my
SUITE 700 (c) City, State, and ZIP Code		candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  COTTON VICTORY  (b) Address (number and street)  901 N WASHINGTON STREE  SUITE 700  (c) City, State, and ZIP Code	ned committee,	which is NOT	my princip	g Representative	es) nmittee, to receive and ex	xpend funds or	n behalf of my
SUITE 700		candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  COTTON VICTORY  (b) Address (number and street)  901 N WASHINGTON STREE  SUITE 700  (c) City, State, and ZIP Code	ned committee,	which is NOT	my princip	g Representative	es) nmittee, to receive and ex	kpend funds or	n behalf of my
SUITE 700  (c) City, State, and ZIP Code  ALEXANDRIA  VA 22314		candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  COTTON VICTORY  (b) Address (number and street) 901 N WASHINGTON STREE  SUITE 700  (c) City, State, and ZIP Code  ALEXANDRIA	ned committee,	which is NOT	my princip	g Representative al campaign com ee.  VA	es) nmittee, to receive and ex		
SUITE 700  (c) City, State, and ZIP Code  ALEXANDRIA  VA  22314  I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.		candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  COTTON VICTORY  (b) Address (number and street)  901 N WASHINGTON STREE  SUITE 700  (c) City, State, and ZIP Code  ALEXANDRIA	ned committee,	which is NOT	my princip	g Representative al campaign com ee.  VA	es) nmittee, to receive and ex		
SUITE 700  (c) City, State, and ZIP Code  ALEXANDRIA  VA  22314   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  Date	Sig	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  COTTON VICTORY  (b) Address (number and street) 901 N WASHINGTON STREE SUITE 700  (c) City, State, and ZIP Code ALEXANDRIA  I certify that I have example of Candidate	ned committee,	which is NOT	my princip	g Representative al campaign com ee.  VA	es) nmittee, to receive and ex  22314  and belief it is true, correc		
SUITE 700  (c) City, State, and ZIP Code  ALEXANDRIA  VA  22314  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  Cotton, Tom	Sig	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  COTTON VICTORY  (b) Address (number and street) 901 N WASHINGTON STREE SUITE 700  (c) City, State, and ZIP Code ALEXANDRIA  I certify that I have example of Candidate	ned committee,	which is NOT	my princip	g Representative al campaign com ee.  VA  my knowledge a	es) nmittee, to receive and ex  22314  and belief it is true, correc  Date		
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SUITE 700  (c) City, State, and ZIP Code ALEXANDRIA  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 Cotton, Tom, , , [Electronically Filed]  Date 12/22/2020	Sig	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  COTTON VICTORY  (b) Address (number and street)  901 N WASHINGTON STREE  SUITE 700  (c) City, State, and ZIP Code  ALEXANDRIA  I certify that I have example of Candidate  stron, Tom, , ,	ned committee, iled with the pro	which is NOT	the best of	g Representative al campaign com ee.  VA  my knowledge a	es) nmittee, to receive and expending the street and belief it is true, correct pate 12/22/2020	t and complete	9.
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SUITE 700 (c) City, State, and ZIP Code		candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  COTTON VICTORY  (b) Address (number and street)  901 N WASHINGTON STREE  SUITE 700  (c) City, State, and ZIP Code	ned committee,	which is NOT	my princip	g Representative	es) nmittee, to receive and ex	xpend funds or	n behalf of my
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SUITE 700  (c) City, State, and ZIP Code  ALEXANDRIA  VA  22314  I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.		candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  COTTON VICTORY  (b) Address (number and street)  901 N WASHINGTON STREE  SUITE 700  (c) City, State, and ZIP Code  ALEXANDRIA	ned committee,	which is NOT	my princip	g Representative al campaign com ee.  VA	es) nmittee, to receive and ex  22314  and belief it is true, correc		
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FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

Page	<sup>2</sup> of	2
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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

σ.	I hereby authorize the following named committee, which is NOT candidacy. <b>NOTE</b> : This designation should be filed with the prince	,, , ,		n behalf of my
	(a) Name of Committee (in full)			
	DEFEND THE SENATE			
	(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 candidacy. <b>NOTE</b> : This designation should be filed with the prince			n behalf of my
	(a) Name of Committee (in full)			
	THE VICTORY CLUB			
	(b) Address (number and street) PO BOX 60148			
	(c) City, State, and ZIP Code			
	WASHINGTON	DC	20039	
8.	I hereby authorize the following named committee, which is NOT candidacy. NOTE: This designation should be filed with the prince (a) Name of Committee (in full)  THE FOUNDERS COMMITTEE  (b) Address (number and street) 1305 W 11TH ST #213			n behalf of my
8.	candidacy. NOTE: This designation should be filed with the prince  (a) Name of Committee (in full)  THE FOUNDERS COMMITTEE  (b) Address (number and street) 1305 W 11TH ST			n behalf of my
	candidacy. NOTE: This designation should be filed with the prince  (a) Name of Committee (in full)  THE FOUNDERS COMMITTEE  (b) Address (number and street) 1305 W 11TH ST #213  (c) City, State, and ZIP Code	TX  Typrincipal campaign	77008  committee, to receive and expend funds of	