FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 3

1. (a) Name of Candidate (in full)							
BOOZMAN, SEN. JOHN, , , (b) Address (number and street) PO BOX 671	Check if addres	ss changed			ate's FEC Identifi	cation Numb	er
				S0AR(
(c) City, State, and ZIP Code ROGERS	AR	R 72757		3. Is This Staten	nent (N)	OR	Amended (A)
4. Party Affiliation	5. Office Sought		6. State & Distr		date		
REPUBLICAN PARTY	Senate		AR	00			
DE		INCIPAL	CAMPAIGN		ITTEE		
7. I hereby designate the following na	med political committee as m	ny Principal C	Campaign Comm	nittee for the	2022 (year of election	_ election(s)	
NOTE: This designation should be	filed with the appropriate office	ce listed in th	e instructions.				
(a) Name of Committee (in full) BOOZMAN FOR A	RKANSAS						
(b) Address (number and street) PO BOX 671							
(c) City, State, and ZIP Code							
ROGERS			AR	72757	7		
 8. I hereby authorize the following nar candidacy. NOTE: This designation should be (a) Name of Committee (in full) BOOZMAN VICTOR 	filed with the principal campa			nmittee, to re	eceive and exper	nd funds on b	ehalf of my
(b) Address (number and street)							
901 N WASHINGTON ST							
CC City, State, and ZIP Code							
ALEXANDRIA			VA	22314			
I certify that I have exa	amined this Statement and to	the best of r	my knowledge al	nd belief it is	s true, correct an	d complete.	
Signature of Candidate				Date			
BOOZMAN, SEN. JOHN, , ,		[Elect	ronically Filed]	07/28/20	22		
NOTE: Submission of false, erroneous	, or incomplete information n	nay subject tł	ne person signin	g this Stater	ment to penalties	s of 2 U.S.C. §	§437g.
						FEC FOR	M 2 (REV. 02/2009)

Image# 202207289525069461

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)			
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)		
TAKE BACK THE SENATE		
(b) Address (number and street) PO BOX 9891		
(c) City, State, and ZIP Code		
ARLINGTON	VA	22219

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)		
2021 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)						
2022 SENATORS CLASSIC COMMITTEE						
(b) Address (number and street) 228 S. WASHINGTON STREET						
SUITE 115						
(c) City, State, and ZIP Code						
ALEXANDRIA	VA	22314				

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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 MCCONNELL		
(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.

(b) Address (number and street)		
(c) City, State, and ZIP Code		

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

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