

Image# 202101059394507461

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Loeffler, Kelly, , ,			2. Candidate's FEC Identification Number SOGA00526	
(b) Address (number and street) PO Box 11623		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Atlanta		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought Senate		6. State & District of Candidate GA 00

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) Georgians for Kelly Loeffler		
(b) Address (number and street) PO Box 11623		
(c) City, State, and ZIP Code Atlanta GA 30355		

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 Georgia Battleground Fund		
(b) Address (number and street) PO Box 60148		
(c) City, State, and ZIP Code Washington DC 20039		

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 Loeffler, Kelly, , , <i>[Electronically Filed]</i>	Date 01/05/2021
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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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: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F2A

Transaction ID :

2020 Special Election.

Form/Schedule:

Transaction ID:

Optional Supplemental Page for Designation
of Additional Authorized Committees

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)

Team Loeffler

(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)

Loeffler Victory Committee

(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)

THE FOUNDERS COMMITTEE

(b) Address (number and street)

1305 W 11TH ST

#213

(c) City, State, and ZIP Code

HOUSTON

TX

77008

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)

GEORGIA 2020 SENATE REPUBLICAN FUND - KELLY LOEFFLER

(b) Address (number and street)

1305 W 11TH ST.

#213

(c) City, State, and ZIP Code

HOUSTON

TX

77008