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#### FEC FORM 2

#### STATEMENT OF CANDIDACY

1 (a) Nam	e of Candidate (in full)						
` ,	CORMICK, DAVE, , ,						
	ress (number and street) BOX 23537	☐ Chec	k if addres	ss changed		Candidate's FEC Identification Number     S2PA00661	
. , , , .	State, and ZIP Code TSBURGH		PA	1522	2	3. Is This Statement (N) OR (A) Amended (A)	
4. Party Af	filiation BLICAN PARTY	5. Office Sought Senate			6. State & Dis	trict of Candidate	
KLFOL	-						
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE						
7. I hereby	Thereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)						
	This designation should be	filed with the appro	priate offic	e listed in th	ne instructions.		
` '	e of Committee (in full)						
FF	RIENDS OF DAVE	MCCORMI	CK				
(b) Addr	ress (number and street)						
PO	BOX 23537						
(c) City,	State, and ZIP Code						
Pľ	TTSBURGH				PA	15222	
	DE					COMMITTEES	
		(Inclu	uding Join	t Fundraisin	g Representativ	ves)	
8. I hereby candida	-	ned committee, wh	ich is NOT	my principa	al campaign co	mmittee, to receive and expend funds on behalf of my	
NOTE:	This designation should be	filed with the princip	oal campai	ign committe	ee.		
(a) Nam	e of Committee (in full)						
D	AVE MCCORMIC	K FOR US	SENAT	ΓΕ			
(b) Addr	ress (number and street)						
PO	BOX 23537						
(c) City,	State, and ZIP Code						
PIT	TSBURGH				PA	15222	
	I certify that I have exa	amined this Stateme	ent and to	the hest of	my knowledge	and belief it is true, correct and complete.	
Signature	of Candidate					Date -	
_	ICK, DAVE, , ,					07/16/2024	
MCCORM	ICK, DAVE, , ,					07/10/2024	
NOTE: Sub	omission of false, erroneous	, or incomplete info	ormation m	ay subject t	ne person signi	ing this Statement to penalties of 2 U.S.C. §437g.	
NOTE: Sub	omission of false, erroneous	, or incomplete info	ormation m	ay subject t	ne person signi	ing 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

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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. <b>NOTE</b> : 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			
8.	I hereby authorize the following named committee, which is NOT my candidacy. <b>NOTE</b> : This designation should be filed with the principal					
	(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 NOT my candidacy. NOTE: This designation should be filed with the principal (a) Name of Committee (in full)  2024 THUNE REPUBLICAN SENATE VICT  (b) Address (number and street)	I campaign committe				
	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 NOT my candidacy. <b>NOTE</b> : This designation should be filed with the principal					
	(a) Name of Committee (in full)					
	RECLAIM THE MAJORITY					
	(b) Address (number and street) 421 OFFICE PARK DRIVE					
	(c) City, State, and ZIP Code					
	MOUNTAIN BROOK	AL	35223			

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)

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. <b>NOTE</b> : 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 N candidacy. <b>NOTE</b> : This designation should be filed with the p		·	у		
	(a) Name of Committee (in full)			_		
	MCCORMICK FOR PA SENATE REPU	JBLICAN NOMINE	E FUND 2024			
	(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 N candidacy. NOTE: This designation should be filed with the p  (a) Name of Committee (in full)  SENATE PATH TO VICTORY 2024		·	y _		
	(b) Address (number and street) 421 OFFICE PARK DRIVE			_		
	421 OFFICE PARK DRIVE			_		
	, ,	AL	35223	_		
8.	421 OFFICE PARK DRIVE  (c) City, State, and ZIP Code	OT my principal campaign c	committee, to receive and expend funds on behalf of m			
8.	421 OFFICE PARK DRIVE  (c) City, State, and ZIP Code MOUNTAIN BROOK  I hereby authorize the following named committee, which is N	OT my principal campaign c	committee, to receive and expend funds on behalf of m			
8.	421 OFFICE PARK DRIVE  (c) City, State, and ZIP Code MOUNTAIN BROOK  I hereby authorize the following named committee, which is N candidacy. NOTE: This designation should be filed with the p	OT my principal campaign or rincipal campaign committee	committee, to receive and expend funds on behalf of m			
8.	421 OFFICE PARK DRIVE  (c) City, State, and ZIP Code MOUNTAIN BROOK  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)	OT my principal campaign or rincipal campaign committee	committee, to receive and expend funds on behalf of m			
8.	421 OFFICE PARK DRIVE  (c) City, State, and ZIP Code MOUNTAIN BROOK  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)  HOVDE MCCORMICK VICTORY CON  (b) Address (number and street)	OT my principal campaign or rincipal campaign committee	committee, to receive and expend funds on behalf of m	yy		