

Image# 202307059582431491

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Blackburn, Marsha, , Mrs.,		
(b) Address (number and street) 6103 Murray Lane		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Brentwood TN 37027-6209		2. Candidate's FEC Identification Number S8TN00337
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought Senate
		6. State & District of Candidate TN
3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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) Marsha for Senate		
(b) Address (number and street) PO Box 3750		
(c) City, State, and ZIP Code Brentwood TN 37024		

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 Victory Fund		
(b) Address (number and street) PO Box 3241		
(c) City, State, and ZIP Code Brentwood TN 37024		

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 Blackburn, Marsha, , , <i>[Electronically Filed]</i>	Date 07/05/2023
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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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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)

Blackburn Tennessee Victory Fund

(b) Address (number and street)

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

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)

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

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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)

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)

(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