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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full) HOGAN, LARRY, , ,												
	(b) Address (number and stree 2077 SOMERVILLE ROAD SUITE 206	dress (number and street) ☐ Check if address changed							Candidate's FEC Identification Number S4MD00483				
	(c) City, State, and ZIP Code ANNAPOLIS		MD 21401				3. Is Thi Stater)R	X (A)		
4.	Party Affiliation	5. Offic	ce Soug	ht		6. State & Dis			,				
	REPUBLICAN PARTY		Senate			MD	00						
		DESIGN	OITAI	N OF PR	INCIPAL	CAMPAIG	N COMM	ITTEE					
7.	I hereby designate the following	g named po	litical co	mmittee as m	y Principal (Campaign Com	nmittee for the	$\frac{2024}{\text{(year of election)}}$		ection	n(s).		
	NOTE: This designation should		h the ap	propriate offic	ce listed in th	ne instructions.							
	(a) Name of Committee (in full)			_									
	HOGAN FOR MA	ARYLAN	ID IN	C.									
	(b) Address (number and stree	,											
	2077 SOMERVILLE ROA SUITE 206	AD											
	(c) City, State, and ZIP Code												
	ANNAPOLIS					MD	2140	1					
		DESIGN	IATIO	N OF OTI	HER AU	THORIZED	СОММІТ	TEES					
			(1	Including Join	t Fundraisin	g Representati	ives)						
8.	I hereby authorize the following candidacy.	g named con	nmittee,	which is NO	Γ my principa	al campaign co	ommittee, to re	eceive and exp	oend fu	ınds o	n behalf of my		
	NOTE: This designation should	d be filed with	h the pri	ncipal campa	ign committe	ee.							
	(a) Name of Committee (in full)												
	CORNYN VICTO	DRY CC)MMI	TTEE									
	(b) Address (number and stree	t)											
	PO BOX 13026												
	(c) City, State, and ZIP Code												
	AUSTIN					TX	78711						
	I certify that I have	e examined i	this Stat	tement and to	the best of	mv knowledae	and belief it is	s true, correct	and co	mplet	е.		
Si	gnature of Candidate						Date						
	IOGAN, LARRY, , ,						03/06/20	124					
	OTHY, LAIMER, , ,						00/00/20	,					
NO	OTE: Submission of false, errone	eous, or inco	omplete	information m	nay subject t	he person sign	ing this State	ment to penalt	ies of 2	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

	DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)
3.	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 S. WASHINGTON STREET SUITE 115
	(c) City, State, and ZIP Code
	ALEXANDRIA VA 22314
3.	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)
	HOGAN VICTORY FUND
	(b) Address (number and street)
	2077 SOMERVILLE ROAD SUITE 206
	(c) City, State, and ZIP Code
	ANNAPOLIS MD 21401
3.	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
3.	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