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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) TRUMP, DONALD, J., , / PENCE, MICHAEL, R., ,			2. Candidate's FEC Identification Number P80001571	
(b) Address (number and street) 725 FIFTH AVENUE		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code NEW YORK NY 10022		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Presidential	6. State & District of Candidate 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) DONALD J. TRUMP FOR PRESIDENT, INC.		
(b) Address (number and street) 725 FIFTH AVENUE		
(c) City, State, and ZIP Code NEW YORK NY 10022		

### 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) TRUMP VICTORY		
(b) Address (number and street) C/O RED CURVE SOLUTIONS 138 CONANT STREET, 2ND FLOOR		
(c) City, State, and ZIP Code BEVERLY MA 01915		

*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 DONALD J. TRUMP /, MICHAEL R. PENCE, , ,  [Electronically Filed]	Date 03/04/2020
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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)

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(a) Name of Committee (in full)

**TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE**

(b) Address (number and street)

725 FIFTH AVENUE

(c) City, State, and ZIP Code

NEW YORK

NY

10022

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 TRUMP VICTORY**

(b) Address (number and street)

C/O RED CURVE SOLUTIONS

138 CONANT STREET, 2ND FL

(c) City, State, and ZIP Code

BEVERLY

MA

01915

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(a) Name of Committee (in full)

**NEW JERSEY TRUMP VICTORY**

(b) Address (number and street)

C/O RED CURVE SOLUTIONS

138 CONANT STREET 2ND FLOOR

(c) City, State, and ZIP Code

BEVERLY

MA

01915

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(a) Name of Committee (in full)

**COLORADO TRUMP VICTORY**

(b) Address (number and street)

C/O RED CURVE SOLUTIONS

138 CONANT STREET 2ND FLOOR

(c) City, State, and ZIP Code

BEVERLY

MA

01915

Optional Supplemental Page for Designation  
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FEC Form 2S (Revised 02/2017)

DESIGNATION OF OTHER AUTHORIZED COMMITTEES  
(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

SOUTH CAROLINA TRUMP VICTORY

(b) Address (number and street)

C/O RED CURVE SOLUTIONS  
138 CONANT STREET 2ND FLOOR

(c) City, State, and ZIP Code

BEVERLY MA 01915

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(b) Address (number and street)

(c) City, State, and ZIP Code

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