## FEC FORM 2 STATEMENT OF CANDIDACY

1. (a)	Name of Candidate	(in full)									
	Phillips, Dean, , ,										
	(b) Address (number and street) Check if address changed PO Box 741						2. Candidate's FEC Identification Number H8MN03143				
(c) (	City, State, and ZIP	Code					3. Is This		2W	Ameno	ded
(0)	Excelsior	oouc		M	v 5533	1	Staten			<b>×</b> (A)	acu
4. Par	ty Affiliation		5. Office Soug			6. State & Dis	trict of Candid		,		
	MOCRATIC-FARM	1-LABOR	House			MN	03				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7. Ihe	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election(s).										
NOTE: This designation should be filed with the appropriate office listed in the instructions.											
(a) Name of Committee (in full) Dean Phillips for Congress											
(b) Address (number and street) PO Box 741											
(c) (	City, State, and ZIP	Code									
Excelsior						MN	55331	1			
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.											
<b>NOTE:</b> This designation should be filed with the principal campaign committee.											
(a) Name of Committee (in full) Phillips Victory 2022											
(b) Address (number and street) 450 Brimhall Street											
(c) (	City, State, and ZIP	Code									
	Saint Paul					MN	55105	i			
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							Date				•
Phillips, Dean, , ,					[Elec	ronically Filed	12/07/20	22			
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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FEC FORM 2 (REV. 02/2009)