FEC FORM 2 STATEMENT OF CANDIDACY

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1.	(a) Name of Candidate (in full)									
	Smith, Tina, , ,									
	(b) Address (number and street) P.O. Box 14362					2. Candidate's FEC Identification Number S8MN00578				
	(c) City, State, and ZIP Code			3. Is This		ew		Amended		
	Saint Paul) OR	×	(A)	
4.	Party Affiliation	5. Office Sought		6. State & Dist	trict of Candio	date				
_	DEMOCRATIC PARTY	Senate		MN	00					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
(a) Name of Committee (in full)										
Tina Smith for Minnesota										
(b) Address (number and street) P.O. Box 14362										
	(c) City, State, and ZIP Code									
	Saint Paul			MN	55114	ţ				
 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) DSCC VICE CHAIR SMITH FUND										
(b) Address (number and street) 120 MARYLAND AVE NE										
(c) City, State, and ZIP Code										
	WASHINGTON DC 20002									
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.										
S	ignature of Candidate			Date						
Smith, Tina, , ,			[Electronically Filed]			23				
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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