

14 OCT 10 AM 10:37

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Kay R. Hagan		
(b) Address (number and street) 305 Meadowbrook Terrace		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Greensboro NC 27408		2. Candidate's FEC Identification Number S8NC00239
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought Senate
		6. State & District of Candidate NC 00
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 2014 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) Hagan for US Senate, Inc.		
(b) Address (number and street) PO Box 29103		
(c) City, State, and ZIP Code Greensboro DC 27429		

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

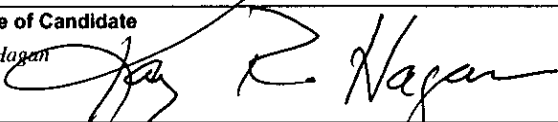
(Including Joint Fundraising Representatives)

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) Hagan Victory Fund		
(b) Address (number and street) 600 Pennsylvania Ave SE Suite 210		
(c) City, State, and ZIP Code Washington DC 20003		

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 Kay R. Hagan 	Date 09/16/2014
---	--------------------

**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--	--

14020741534

# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 2 / 9

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

Off the Sidelines: LA NC NH

(b) Address (number and street)

600 Pennsylvania Ave SE  
Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

Louisiana North Carolina & Rhode Island Victory 2014

(b) Address (number and street)

600 Pennsylvania Ave SE  
Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

Louisiana North Carolina Victory 2014

(b) Address (number and street)

600 Pennsylvania Ave SE  
Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

14020741535

# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 3 / 9

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

North Carolina/New Hampshire Victory Fund

(b) Address (number and street)

600 Pennsylvania Ave SE  
Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

Kay Hagan Senate Victory

(b) Address (number and street)

120 Maryland Avenue NE

(c) City, State and ZIP Code

Washington

DC

20002

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

North Carolina Senate Victory 2014

(b) Address (number and street)

120 Maryland Avenue NE

(c) City, State and ZIP Code

Washington

DC

20002

14020741536

# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 4 / 9

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

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)

Women of the Senate Fund 2014

(b) Address (number and street)

600 Pennsylvania Avenue SE  
Suite 210

(c) City, State and ZIP Code

Washington

DC

20002

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

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)

Arkansas North Carolina Louisiana Victory Fund

(b) Address (number and street)

600 Pennsylvania Avenue SE  
Suite 210

(c) City, State and ZIP Code

Washington

DC

20002

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

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)

Women on the Road to the Senate: 16 and Counting - Los Angeles

(b) Address (number and street)

120 Maryland Avenue NE

(c) City, State and ZIP Code

Washington

DC

20003

14020741537

# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 5 / 9

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

Women on the Road to the Senate: 16 and Counting - San Francisco

(b) Address (number and street)

120 Maryland Avenue NE

(c) City, State and ZIP Code

Washington

DC

20003

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

Women on the Road to the Senate: 16 and Counting - Seattle

(b) Address (number and street)

120 Maryland Avenue NE  
Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

Hagan Merkley Victory Fund

(b) Address (number and street)

600 Pennsylvania Avenue SE  
Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

14020741538

# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 6 / 9

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

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)

Hagan Forward NC

(b) Address (number and street)

600 Pennsylvania Avenue SE  
Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

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)

Kay Hagan North Carolina Victory 2014

(b) Address (number and street)

120 Maryland Avenue NE

(c) City, State and ZIP Code

Washington

DC

20002

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

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)

Democratic Senate Victory Fund

(b) Address (number and street)

120 Maryland Avenue NE

(c) City, State and ZIP Code

Washington

DC

20002

14020741539

# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 7 / 9

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

Colorado North Carolina Victory Fund

(b) Address (number and street)

600 Pennsylvania Avenue SE

Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

New Mexico North Carolina Victory Fund

(b) Address (number and street)

600 Pennsylvania Avenue SE

Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

Kentucky North Carolina Victory Fund

(b) Address (number and street)

600 Pennsylvania Avenue SE

Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

14020741540

# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 8 / 9

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

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)

Cantwell for Women in the Senate 2014

(b) Address (number and street)

119 1st Avenue South  
Suite 320

(c) City, State and ZIP Code

Seattle WA 98104

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

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)

Off the Sidelines Senate 2014

(b) Address (number and street)

600 Pennsylvania Avenue SE  
Suite 210

(c) City, State and ZIP Code

Washington DC 20003

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

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)

Grassroots Victory Project 2014

(b) Address (number and street)

120 Maryland Avenue NE

(c) City, State and ZIP Code

Washington DC 20002

14020741541



# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 9 / 9

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

Blue Senate 2014

(b) Address (number and street)

600 Pennsylvania Avenue SE  
Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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

14020741542



CONTRIBUTOR INFORMATION FORM

Hagan for U.S. Senate, Inc.

Ocean Safe Housing, LLC
135 Crossways Park Dr
Ste LL-03
Woodbury, NY 11797

We are providing this response letter to identify the nature of your organization as federal law prohibits us from accepting corporate contributions:

(Please check one)

X Ocean Safe Housing, LLC has elected to file as a partnership for tax purposes. Please allocate our contribution to the following LLC member(s) as indicated:

Vincent P. Basilice \$ 500.00
\$
\$

(Please attach another sheet, if necessary)

Ocean Safe Housing, LLC has elected to file as a corporation for tax purposes, or is publicly traded. Please return our contribution.

Signed: [Signature]

Date: 08/20/2014

Title: Managing Member

Please return by email to lsnyder@kayhagan.com or fax to (919) 516-0930.

14020741543

**FORM VA-16**  
(DOC ID 316)

**Please do not  
fold or staple**

EMPLOYER'S QUARTERLY RECONCILIATION AND  
RETURN OF VIRGINIA INCOME TAX WITHHELD

*Make Check or Money Order Payable to*  
VA Department of Taxation  
P.O. BOX 27264 RICHMOND, VA 23218-7264  
FOR INFORMATION CALL 804-367-8037

CHECK HERE IF PAID BY EFT

1. VA Income Tax Withheld	133.75
2. Previous Period(s) Adjustment	
3. Adjusted Total	133.75
4. Payments made during the period of this return	133.75
5. Balance tax due this quarter	0.00
6. Penalty	
7. Interest	
8. Payment for month following the period of this return	
9. Total Amount Due	0.00

FOR PERIOD ENDING	DUE DATE	ACCOUNT NUMBER
MAR 2014	04/30/14	

HAGAN FOR US SENATE INC  
PO BOX 9258  
GREENSBORO NC 27429

I declare that this return (including any accompanying schedules and statements) has been prepared by me and to the best of my knowledge and belief is a true, correct and complete return.

REFERENCE COPY PREPARED BY PAYCHEX. DO NOT FILE.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ TELEPHONE NUMBER \_\_\_\_\_

14020741544

PLEASE PRESS FIRMLY



UNITED STATES POSTAL SERVICE

Flat Rate Mailing Envelope

Visit us at [usps.com](http://usps.com)

INTERNATIONAL RESTRICTIONS APPLY:  
Customs forms are required. Consult the  
International Mail Manual (IMM) at [pe.usps.gov](http://pe.usps.gov)  
or ask a retail associate for details.



USPS TRACKING #



9205 5901 1131 2604 6082 07

Label 055, C04 Jan. 2013

From:/Expéditeur:

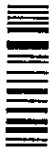
Hagan for Senak  
PO Box 29163  
Greensboro NC 27426

To:/Destinataire:

Office of Public Records  
PO Box 77578  
Washington DC 20013

Country of Destination:/Pays de destination:

SCREENED  
BY THE SENATE  
POST OFFICE



# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

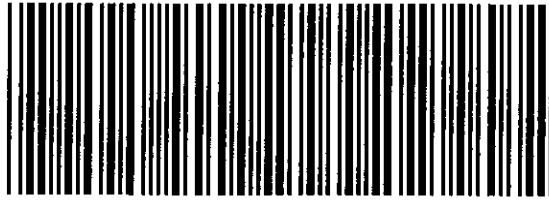
POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

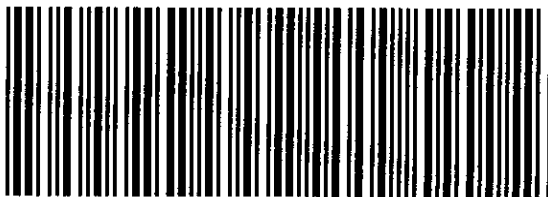
OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 10-10-14

14020741546



SEN PATCH



SEN PATCH

14020741547