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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
_	Baugh, Scott, , ,								
	(b) Address (number and street) 4040 Macarthur Boulevard Suite 200	□С	heck if addre	ss changed		2. Candidate's FE H6CA48245	C Identifica	tion Number	
	(c) City, State, and ZIP Code					3. Is This	New		Amended
	Newport Beach		CA	9266	0	Statement	(N)	or X	(A)
4.	Party Affiliation	5. Office Soug	ht		6. State & Dis	trict of Candidate			
	REPUBLICAN PARTY	House			CA	47			
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	I hereby designate the following nar	ned political co	mmittee as n	ny Principal	Campaign Com		of election)	election(s).	
	NOTE: This designation should be f	iled with the ap	propriate offi	ce listed in t	he instructions.				
	(a) Name of Committee (in full)								
	Scott Baugh for Con	gress							
	(b) Address (number and street)								
	4040 Macarthur Boulevard Suite 200								
	(c) City, State, and ZIP Code								
	Newport Beach				CA	92660			
8.	(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)								
	Team Baugh 2024								
	(b) Address (number and street)								
	228 S Washington St								
	Ste 115 (c) City, State, and ZIP Code								
	Alexandria				VA	22314			
	I certify that I have exa	mined this Stat	ement and to	the best of	my knowledge a	and belief it is true, c	correct and o	complete.	
Si	Signature of Candidate			Date					
В	taugh, Scott, , ,					07/09/2024			
N			·						
	OTE: Submission of false, erroneous	or incomplete	information n	nay subject	the person signi	ng this Statement to	penalties of	f 2 U.S.C. §4	37g.
	OTE: Submission of false, erroneous.	or incomplete	information n	nay subject	the person signi	ng this Statement to	penalties of	f 2 U.S.C. §4	37g.

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(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) Grow the Majority CA							
	(c) City, State, and ZIP Code							
	Alexandria	VA	22314					
	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)							
	Scalise Leadership Fund 2024							
	(b) Address (number and street) 320 1st St SE							
	(c) City, State, and ZIP Code							
	Washington	DC	20003					
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)							
	Grow the Majority							
	(b) Address (number and street) 228 S Washington St Ste 115							
	(c) City, State, and ZIP Code							
	Alexandria	VA	22314					
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)							
	Protect the House California 2024							
	(b) Address (number and street) PO Box 30844							
	(c) City, State, and ZIP Code							
	Bethesda	MD	20824					

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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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)							
	Jordan Baugh Victory Committee							
	(b) Address (number and street)							
	502 6th Street							
	(c) City, State, and ZIP Code	_						
	Hudson WI 54016							
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)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
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)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
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)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							