

Image# 202202019486491625

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Braun, Mike, , ,			2. Candidate's FEC Identification Number S8IN00171	
(b) Address (number and street) 505 Main St		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Jasper IN 47546-3133		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	6. State & District of Candidate IN 00		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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) MIKE BRAUN FOR INDIANA		
(b) Address (number and street) PO Box 159		
(c) City, State, and ZIP Code Zionsville IN 46077-0159		

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) Braun Solutions Committee		
(b) Address (number and street) 499 S Capitol St SW Ste 405		
(c) City, State, and ZIP Code Washington DC 20003-4018		

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 Braun, Mike, , , [Electronically Filed]	Date 02/01/2022
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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)

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)

Hoosier Conservative Fund

(b) Address (number and street)

PO Box 4

(c) City, State, and ZIP Code

Westfield

IN

46074-0004

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)

Growing our Senate Majority

(b) Address (number and street)

824 S Milledge Ave

Ste 101

(c) City, State, and ZIP Code

Athens

GA

30605-1332

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)

Protecting The Majority Committee

(b) Address (number and street)

228 S Washington St

Ste 115

(c) City, State, and ZIP Code

Alexandria

VA

22314-5404

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)

Winsome Leaders II

(b) Address (number and street)

901 N Washington ST Ste 700

(c) City, State, and ZIP Code

Alexandria

VA

22314-1535

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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)

Grow The Majority

(b) Address (number and street)

PO Box 3986

(c) City, State, and ZIP Code

Washington

DC

20027-0986

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)

Braun Victory Committee

(b) Address (number and street)

PO BOX 9891

(c) City, State, and ZIP Code

ARLINGTON

VA

22219

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)

Indiana Missouri Victory Committee

(b) Address (number and street)

PO BOX 9891

(c) City, State, and ZIP Code

ARLINGTON

VA

22219

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