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FEC FORM 2

STATEMENT OF CANDIDACY

| 1. | (a) Name of Candidate (in full) | | | | | | | | | | |
|--|---|------------------------|--------------|-------------|------------------|------------------------|---|------------|---------|-------|--|
| | BRADLEY, JAMES, P., , | | | | | | | | | | |
| | (b) Address (number and street) 30902 CLUB HOUSE DRIVE #16 E | | | | | | 2. Candidate's FEC Identification Number S8CA00515 | | | | |
| | c) City, State, and ZIP Code | | | | | 3. Is This New Amended | | | | | |
| | LAGUNA NIGUEL | LAGUNA NIGUEL CA 92677 | | | | Staten | nent (N) | OR | × | (A) | |
| 4. | Party Affiliation | 5. Office Sought | | | 6. State & Dist | rict of Candid | date | | | | |
| | REPUBLICAN PARTY | Senate | | | CA | 00 | | | | | |
| DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE | | | | | | | | | | | |
| 7. | 7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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) JAMES P BRADLEY FOR US SENATE | | | | | | | | | | | |
| (b) Address (number and street) 30902 CLUB HOUSE DRIVE 16E | | | | | | | | | | | |
| | (c) City, State, and ZIP Code | | | | | | | | | | |
| | LAGUNA NIGUEL | | | | CA | 92677 | , | | | | |
| | | | | | | | | | | | |
| DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) 8. Legacy authorize the following parted committee, which is NOT my principal campaign committee, to receive and expend funds on helpfl of my | | | | | | | | | | | |
| 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) | | | | | | | | | | | |
| | (a) raine or committee (iii rain) | | | | | | | | | | |
| | | | | | | | | | | | |
| | (b) Address (number and street) | | | | | | | | | | |
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| | | | | | | | | | | | |
| (c) City, State, and ZIP Code | | | | | | | | | | | |
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| | | | | | | | | | | l l | |
| | I certify that I have exa | mined this Stateme | nt and to th | e best of i | my knowledge a | and belief it is | true, correct ar | nd comple | ete. | | |
| Si | gnature of Candidate | | | | | Date | | | | | |
| Bradley, James, P., Mr. | | | | | | | | | | | |
| | | | | [Elect | ronically Filed] | 11/17/20 | 20 | | | | |
| | | | | | | | | | | | |
| N | OTE: Submission of false, erroneous | , or incomplete infor | mation may | subject t | ne person signir | ng this Stater | ment to penaltie | s of 2 U.S | S.C. §4 | l37g. | |
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FEC FORM 2 (REV. 02/2009)