FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 7

1.	(a) Name of Candidate (in full)					
	Brown, Sam, , ,					
	(b) Address (number and street) PO Box 750844	□ Che	ck if address	changed		2. Candidate's FEC Identification Number S2NV00308
	(c) City, State, and ZIP Code					3. Is This New Amended
	Las Vegas		NV	8913	6	Statement (N) OR X (A)
4.	Party Affiliation	5. Office Sought				rict of Candidate
	REPUBLICAN PARTY	Senate			NV	00
	DE	SIGNATION	OF PRIN	CIPAL	CAMPAIG	
7.	I hereby designate the following nar	med political comm	nittee as my F	Principal	Campaign Comr	nittee for the 2024 election(s).
	NOTE: This designation should be f	iled with the appro	opriate office	listed in t	ne instructions.	
	(a) Name of Committee (in full)					
	SAM BROWN FOR	NEVADA				
	(b) Address (number and street)					
	PO BOX 750844					
	(c) City, State, and ZIP Code					
	LAS VEGAS				NV	89136
ō.	candidacy. NOTE: This designation should be f (a) Name of Committee (in full)	iled with the princi				nmittee, to receive and expend funds on behalf of my
	MAJORITY MAKER	RS FUND				
	(b) Address (number and street) 421 OFFICE PARK DR					
	(c) City, State, and ZIP Code					
	MOUNTAIN BROOK				AL	35223
	I certify that I have exa	mined this Stater	nent and to the	e best of	my knowledge a	and belief it is true, correct and complete.
Si	gnature of Candidate					Date
H	lastie, Chrissie, Hastie, ,					08/07/2024
N	OTE: Submission of false, erroneous	, or incomplete inf	ormation may	subject t	he person signir	ng this Statement to penalties of 2 U.S.C. §437g.

FEC FORM 2 (REV. 02/2009)

Image# 202408079666111720

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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)				
SAM BROWN VICTORY COMMITTEE				
(b) Address (number and street)				
PO BOX 751271				
(c) City, State, and ZIP Code				
LAS VEGAS	NV	89136		

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)					
2024 REPUBLICAN SENATE VICTORY					
(b) Address (number and street)	b) Address (number and street)				
228 S. WASHINGTON STREET					
SUITE 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)				
2024 THUNE REPUBLICAN SENATE VICTOR	Y			
(b) Address (number and street) 228 S. WASHINGTON STREET				
SUITE 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)

 SAM BROWN VICTORY FUND

 (b) Address (number and street)

 3275 N FORT APACHE #150

 (c) City, State, and ZIP Code

 LAS VEGAS
 NV

 89129

Optional Supplemental Page for Designation of Additional Authorized Committees

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)			
BROWN/ROGERS VICTORY FUND			
(b) Address (number and street)			
3275 NORTH FORT APACHE ROAD			
150			
(c) City, State, and ZIP Code			
LAS VEGAS	NV	89129	

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)		
SENATE PATH TO VICTORY 2024		
(b) Address (number and street) 421 OFFICE PARK DR		
(c) City, State, and ZIP Code		
BIRMINGHAM	AL	35223

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)				
2024 SENATORS CLASSIC COMMITTEE				
(b) Address (number and street) 228 S. WASHINGTON STREET				
SUITE 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)

RECLAIM THE MAJORITY

(b) Address (number and street) 421 Office Park Dr

(c) City, State, and ZIP Code

Mountain Brook

35223

AL

Image# 202408079666111722

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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)			
CORNYN VICTORY COMMITTEE			
(b) Address (number and street)			
PO Box 13026			
(c) City, State, and ZIP Code			
Austin	ТХ	78711	

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)					
TILLIS AND COLLEAGUES VICTORY COMMITTEE					
(b) Address (number and street)	(b) Address (number and street)				
228 S. WASHINGTON STREET					
(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)
BROWN FOR NV SENATE REPUBLICAN NOMINEE FUND 2024
(b) Address (number and street)

(b) Address (number and street)				
PO BOX 9891				
(c) City, State, and ZIP Code			 	
(b) only, olato, and Eli obdo				
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)

 FRIENDS OF KENNEDY

 (b) Address (number and street)

 3337 NORTH HULLEN ST.

 SUITE 301

 (c) City, State, and ZIP Code

 METAIRIE
 LA

 70002

Optional Supplemental Page for Designation of Additional Authorized Committees

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)			
2024 REPUBLICAN SENATE VICTORY			
(b) Address (number and street)			
228 S. WASHINGTON STREET			
SUITE 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)			
2024 THUNE REPUBLICAN SENATE VICT	ORY		
(b) Address (number and street)			
228 S. WASHINGTON STREET			
SUITE 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)		
SAM BROWN VICTORY COMMITTEE		
(b) Address (number and street)		
PO BOX 751271		
(c) City, State, and ZIP Code		
LAS VEGAS	NV	89136

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)

SAM BROWN VICTORY FUND

(b) Address (number and street) 3275 N FORT APACHE #150

(c) City, State, and ZIP Code

LAS VEGAS

89129

NV

Optional Supplemental Page for Designation of Additional Authorized Committees

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)			
BROWN/ROGERS VICTORY FUND			
(b) Address (number and street)			
3275 NORTH FORT APACHE ROAD			
150			
(c) City, State, and ZIP Code			
LAS VEGAS	NV	89129	

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)		
SENATE PATH TO VICTORY 2024		
(b) Address (number and street) 421 OFFICE PARK DR		
(c) City, State, and ZIP Code BIRMINGHAM	AL	35223

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)		
2024 SENATORS CLASSIC COMMITTEE		
(b) Address (number and street) 228 S. WASHINGTON STREET		
SUITE 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)

ROAD TO VICTORY

(b) Address (number and street) 421 OFFICE PARK DRIVE

(c) City, State, and ZIP Code MOUNTAIN BROOK

35223

AL

Optional Supplemental Page for Designation of Additional Authorized Committees

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)			
BROWN-DOMENICI VICTORY			
(b) Address (number and street)			
3275 NORTH FORT APACHE ROAD			
150			
(c) City, State, and ZIP Code			
LAS VEGAS	NV	89129	

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)		
BROWN/ROGERS VICTORY FUND		
(b) Address (number and street)		
3275 North Fort Apache Road		
150		
(c) City, State, and ZIP Code		
Las Vegas	NV	89129

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