

Image# 202105189446939764

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) MCCLOSKEY, MARK, T, ,			2. Candidate's FEC Identification Number S2MO00585	
(b) Address (number and street) 4579 LACLEDE AVE PMB 335		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code SAINT LOUIS		MO	63108	3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	6. State & District of Candidate MO 00		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

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) MARK MCCLOSKEY FOR MISSOURI		
(b) Address (number and street) 4579 LACLEDE AVE PMB 335		
(c) City, State, and ZIP Code SAINT LOUIS MO 63108		

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)		
(b) Address (number and street)		
(c) City, State, and ZIP Code		

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 MCCLOSKEY, MARK, T, , <i>[Electronically Filed]</i>	Date 05/18/2021
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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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