FEC FORM 2 STATEMENT OF CANDIDACY



1 (a) Name of Condidate (in fa	ın		2018 MAY 29 AM 11-40	
(a) Name of Candidate (in fu Omeria Lane Scott	II)		•	
(b) Address (number and street)			FEC Candidate Identification Number S8MS00311	
(c) City, State, and ZIP Code Laurel, MS 39440			3. Is This New Statement (N) OR (A)	
4. Party Affiliation DEMOCRAT	5. Office Sought SENATE	6. State & Dis MS	strict of Candidate	
	DESIGNATION OF PRI	NCIPAL CAMPAIG	N COMMITTEE	
7. I hereby designate the follow	ring named political committee as my	/ Principal Campaign Com	mittee for the 2018 election(s).	
NOTE: This designation sho	uld be filed with the appropriate office	e listed in the instructions.	(year of election)	
(a) Name of Committee (in fo	ıll)			
Omeria Scott fo	or U.S. Senate			
(b) Address (number and str	eet)	•		
615 East 19th	Street			
(c) City, State, and ZIP Code				
Laurel, MS 394				
candidacy.			mmittee, to receive and expend funds on behalf of m	
(a) Name of Committee (in fu	ıll)			
(b) Address (number and stre	eet)			
(c) City, State, and ZIP Code				
(5) 6.13, 514.15, 4.14 2.17 6.000				
I certify that I ha	ve examined this Statement and to t	he best of my knowledge a	and belief it is true, correct and complete.	
Signature of Candidate			Date	
NOTE: Submission of false, erro	oneous, or incomplete information ma	ay subject the person sign	ing this Statement to penalties of 52 U.S.C. §30109.	

FEC Form 2S (Revised 02/2017)

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Optional Supplemental Page for Designation of Additional Authorized Committees

Page	of	

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

3.	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			
3.	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			
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	(b) Address (number and street)			
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	(a) Name of Committee (in full)			
	(b) Address (number and street)			
	(c) City, State, and ZIP Code			

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