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Image# 202107029450978787

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)				
Kelly, Mark, , ,				
(b) Address (number and street) PO Box 27202	☐ Check if addre	ess changed		Candidate's FEC Identification Number S0AZ00350
(c) City, State, and ZIP Code				3. Is This New Amended
Tucson	A	Z 8572	6	Statement (N) OR (A)
4. Party Affiliation	5. Office Sought		6. State & Dist	rict of Candidate
DEMOCRATIC PARTY	Senate		AZ	
DE	SIGNATION OF PR	INCIPAL	CAMPAIGN	N COMMITTEE
7. I hereby designate the following nan	ned political committee as r	my Principal	Campaign Comn	nittee for the $\frac{2022}{\text{(year of election)}}$ election(s).
NOTE: This designation should be fi	led with the appropriate off	ice listed in t	he instructions.	
(a) Name of Committee (in full)				
Mark Kelly for Senat	е			
(b) Address (number and street)				
PO Box 27202				
(c) City, State, and ZIP Code				
Tucson			AZ	85726
1 400011				
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 fi	led with the principal campa	aign committ	ee.	
(a) Name of Committee (in full)				
Mark Kelly Victory F	und			
(b) Address (number and street) 3104 E Camelback Rd				
#924 (c) City, State, and ZIP Code				
• •				
Phoenix			AZ	85016
I certify that I have exa	nined this Statement and to	o the best of	mv knowledae a	and belief it is true, correct and complete.
Signature of Candidate				Date
Kelly, Mark, , ,		[Elec	tronically Filed]	07/02/2021
NOTE: Submission of false, erroneous,	or incomplete information i	may subject	the person signir	ng this Statement to penalties of 2 U.S.C. §437g.
1 1				

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my randidacy. NOTE : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	Blue Senate Candidate Fund					
	(b) Address (number and street) 918 Pennsylvania Ave SE					
	(c) City, State, and ZIP Code					
	Washington	DC	20003			
8.	I hereby authorize the following named committee, which is NOT my prin		•	· my		
	candidacy. NOTE : This designation should be filed with the principal can (a) Name of Committee (in full)	npaign commi	niee.			
	Common Sense 2020					
	(b) Address (number and street) 910 17th Street, NW					
	Suite 925					
	(c) City, State, and ZIP Code					
	Washington	DC	20006			
8.	I hereby authorize the following named committee, which is NOT my prin candidacy. NOTE : This designation should be filed with the principal can			my		
	(a) Name of Committee (in full)					
	Power Up Joint Committee					
	(b) Address (number and street) 124 Washington Street					
	Suite 101					
	(c) City, State, and ZIP Code					
	Foxboro	MA	02035			
8.	I hereby authorize the following named committee, which is NOT my prin candidacy. NOTE : This designation should be filed with the principal can			my		
	(a) Name of Committee (in full) Win the West 2022					
	(b) Address (number and street) 910 17th NW Ste 925					
	(c) City, State, and ZIP Code			—		
	Washington	DC	20006			

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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Page	· 01	-

DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

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(b) Address (number and street) 600 Pennsylvania Ave SE #15180 (c) City, State, and ZIP Code Washington DC 20003 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on beha 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 beha 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 beha candidacy. NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds on beha candidacy. NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds on beha candidacy. NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds on beha candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)		a) Name of Committee (in full)						
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