FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 3

1. (a) Name of Candidate (in full) TENNEY, CLAUDIA, , ,						
(b) Address (number and street) PO BOX 378	□ Check if a	ddress cha	anged		2. Candidate's FEC Identification Number	
					H4NY22051 3. Is This New Amer	adad
(c) City, State, and ZIP Code VICTOR		NY	14564	1	3. Is This New Amer Statement (N) OR (A)	lueu
4. Party Affiliation	5. Office Sought				rict of Candidate	
REPUBLICAN PARTY	House			NY	24	
DE	SIGNATION OF	PRINCI	PAL	CAMPAIG		
7. I hereby designate the following nar	ned political committee	as my Prin	icipal C	Campaign Comr	nittee for the 2024 election(s). (year of election)	
NOTE: This designation should be f	iled with the appropriate	e office liste	ed in th	e instructions.		
(a) Name of Committee (in full)						
CLAUDIA TENNEY	FOR CONGRE	SS				
(b) Address (number and street)						
PO BOX 378						
(c) City, State, and ZIP Code						
VICTOR				NY	14564	
candidacy. NOTE: This designation should be f (a) Name of Committee (in full)	led with the principal ca	ampaign cc	ommitte	96.		
IRON LADIES PAC						
(b) Address (number and street) PO BOX 341027						
(c) City, State, and ZIP Code						
AUSTIN				ТХ	78734	
I certify that I have exa	mined this Statement a	nd to the b	est of r	my knowledge a	and belief it is true, correct and complete.	
Signature of Candidate					Date	
Tenney, Claudia, , ,					01/03/2024	
NOTE: Submission of false, erroneous,	or incomplete informat	ion may su	bject tł	ne person signir	ng this Statement to penalties of 2 U.S.C. §437g.	
					FEC FORM 2 (REV.	02/2009)

Image# 202401039599932810

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)			
TENNEY VAN DUYNE VICTORY FUN	D		
(b) Address (number and street)			
PO BOX 341027			
(c) City, State, and ZIP Code			
AUSTIN	ТХ	78734	

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)		
FRONTLINE NEW YORK		
(b) Address (number and street) PO BOX 183		
(c) City, State, and ZIP Code HUDSON	WI	54016

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)					
CLAUDIA TENNEY FOR CONGRESS VICTORY FUND					
(b) Address (number and street)					
PO BOX 378					
(c) City, State, and ZIP Code					
VICTOR	NY	14564			

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)

TAKE BACK NEW YORK

(b) Address (number and street) 1390 CHAIN BRIDGE RD STE 515

(c) City, State, and ZIP Code

MCLEAN

22101

VA

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)				
GROW THE MAJORITY NY				
(b) Address (number and street)				
228 S WASHINGTON ST STE 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.

(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)

(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