

Image# 202203189493995823

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Rosendale, Matt, , Mr.,			2. Candidate's FEC Identification Number H4MT00050	
(b) Address (number and street) PO Box 4907		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Helena MT 59604-4907		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate MT 02		

### 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) Matt Rosendale for Montana		
(b) Address (number and street) PO Box 4907		
(c) City, State, and ZIP Code Helena MT 59604		

### 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 Rosendale, Matt, , Mr.,  <i>[Electronically Filed]</i>	Date 03/18/2022
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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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Optional Supplemental Page for Designation  
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

**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)

ROSENDALE VICTORY FUND

(b) Address (number and street)

1390 CHAIN BRIDGE ROAD #515

(c) City, State, and ZIP Code

MCLEAN

VA

22101

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 THE HOUSE 2022

(b) Address (number and street)

PO BOX 30844

(c) City, State, and ZIP Code

BETHESDA

MD

20824

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)

FREEDOMWORKS VICTORY 2022

(b) Address (number and street)

PO BOX 26141

(c) City, State, and ZIP Code

ALEXANDRIA

VA

22313

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)

ROSENDALE MAJORITY FUND

(b) Address (number and street)

PO BOX 4907

(c) City, State, and ZIP Code

HELENA

MT

59604

Optional Supplemental Page for Designation  
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(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

ROSENDALE HARRIS 2022

(b) Address (number and street)

PO BOX 4907

(c) City, State, and ZIP Code

HELENA

MT

59604

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(c) City, State, and ZIP Code

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