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FEC FORM 2

STATEMENT OF CANDIDACY

=	() NI										
1.	(a) Name of Candidate (in full)										
	LaRose, Frank, , ,					_					
	(b) Address (number and street) 200 Civic Center Drive Suite 1200	☐ Check if address changed				Candidate's FEC Identification Number S4OH00200					
	(c) City, State, and ZIP Code					3. Is This		ew	Amended		
	Columbus	OH 43215				Statem	nent X (N) OR	(A)		
4.	Party Affiliation	5. Office Soug	ght		6. State & Dist	trict of Candid	date			_	
	REPUBLICAN PARTY	Senate			OH	00					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)										
	LaRose for Senate										
	(b) Address (number and street)									_	
	200 Civic Center Drive										
	Suite 1200										
	(c) City, State, and ZIP Code										
	Columbus				ОН	43215	5				
 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 											
_	Loartify that Lhave eva	mined this Sta	tement and to	n the hest of	my knowledge s	and helief it is	true correct	and comp	lete		
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.											
	gnature of Candidate					Date				•	
L	aRose, Frank, , ,			[Elec	tronically Filed]	07/17/20	23				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											

FEC FORM 2 (REV. 02/2009)