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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Rose, John, W., ,					100		
	(b) Address (number and street) PO Box 2404	☐ Check if address changed				Candidate's FEC Identification Number     H8TN06094		
	(c) City, State, and ZIP Code					3. Is This New	<b>V</b>	
	Cookeville		TN	3850		Statement (N)	OR × (A)	
4.	Party Affiliation REPUBLICAN PARTY	5. Office Soug House	ht		6. State & Dis	trict of Candidate 06		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full)							
John Rose for Tennessee								
	(b) Address (number and street)							
	PO Box 2404							
	(c) City, State, and ZIP Code							
	Cookeville				TN	38502		
(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)								
John Rose Victory Fund								
	(b) Address (number and street) PO Box 2404							
	(c) City, State, and ZIP Code							
	Cookeville				TN	38502		
	I certify that I have exa	mined this Stat	ement and to	the best of	my knowledge a	and belief it is true, correct a	nd complete.	
Signature of Candidate						Date		
Rose, John, W., ,						11/09/2024		
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)