FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 5

| 1. (a) Name of Candidate (in full) | | | | | |
|--|---------------------------|----------------|------------|------------------|--|
| Ciscomani, Juan, , , (b) Address (number and street) | Charle i | f address o | handed | | 2. Candidate's FEC Identification Number |
| Po Box 35103 | | 1 2001635 0 | nangeu | | H2AZ02360 |
| (c) City, State, and ZIP Code | | . 7 | 0574 | 0 5400 | 3. Is This New Amended Statement (N) OR X (A) |
| | 5.0% | AZ | 8574 | 0-5103 | |
| 4. Party Affiliation REPUBLICAN PARTY | 5. Office Sought House | | | AZ | rict of Candidate 06 |
| DE | SIGNATION O | F PRIN | | CAMPAIG | |
| 7. I hereby designate the following nat | med political committe | ee as my P | rincipal (| Campaign Comr | nittee for the 2024 election(s). (year of election) |
| NOTE: This designation should be | filed with the appropri | iate office li | sted in tl | ne instructions. | - · · · |
| (a) Name of Committee (in full) | | | | | |
| Ciscomani for Cong | ress | | | | |
| (b) Address (number and street) | | | | | |
| PO Box 35103 | | | | | |
| (c) City, State, and ZIP Code | | | | | |
| Tucson | | | | AZ | 85740-5103 |
| I hereby authorize the following nar candidacy. NOTE: This designation should be to | | | | | nmittee, to receive and expend funds on behalf of my |
| (a) Name of Committee (in full) | | | | | |
| Ciscomani Victory F | Fund | | | | |
| (b) Address (number and street) P.o. Box 35103 | | | | | |
| | | | | | |
| (c) City, State, and ZIP Code | | | | | |
| Tucson | | | | AZ | 85740-5103 |
| I certify that I have exa | amined this Statement | t and to the | e best of | my knowledge a | and belief it is true, correct and complete. |
| Signature of Candidate | | | | | Date - |
| Ciscomani, Juan, , , | | | | | 08/14/2024 |
| NOTE: Submission of false, erroneous | , or incomplete inform | nation may | subject t | he person signir | ng this Statement to penalties of 2 U.S.C. §437g. |
| | | | | | |
| | | | | | |

FEC FORM 2 (REV. 02/2009)

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F2A Transaction ID :

Form/Schedule: Transaction ID: 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.

| MD | 20824-0844 | |
|----|------------|---------------|
| | MD | MD 20824-0844 |

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) | | | |
|---------------------------------|----|------------|--|
| Protect The House 2024 | | | |
| (b) Address (number and street) | | | |
| PO Box 30844 | | | |
| (c) City, State, and ZIP Code | | | |
| Bethesda | MD | 20824-0844 | |
| | | | |

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) | | |
|--|----|------------|
| Hispanic Leadership Trust Partnership | | |
| (b) Address (number and street) 1005 Congress Ave | | |
| Ste 400 (c) City, State, and ZIP Code | | |
| Austin | ТХ | 78701-2469 |

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| (a) Name of Committee (in full) | | | |
|---------------------------------|----|-------|--|
| Emmer Majority Builders | | | |
| (b) Address (number and street) | | | |
| 824 S. Milledge Ave. Ste. 101 | | | |
| (c) City, State, and ZIP Code | | | |
| Athens | GA | 30606 | |
| | | | |

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| (a) Name of Committee (in full) | | |
|---------------------------------|----|------------|
| JKLC Victory Fund | | |
| (b) Address (number and street) | | |
| 502 6th St | | |
| (c) City, State, and ZIP Code | | |
| Hudson | WI | 54016-1783 |
| | | |

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) | | |
|--|----|------------|
| NRCC Arizona Victory | | |
| (b) Address (number and street) 228 S Washington St | | |
| Ste 115 (c) City, State, and ZIP Code | | |
| Alexandria | VA | 22314-5404 |

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| (a) Name of Committee (in full) | | | | | |
|---------------------------------|----|------------|--|--|--|
| Scott Franklin Wingman Fund | | | | | |
| (b) Address (number and street) | | | | | |
| P.o. Box 2811 | | | | | |
| | | | | | |
| (c) City, State, and ZIP Code | | | | | |
| Lakeland | FL | 33806-2811 | | | |
| | | | | | |

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| (a) Name of Committee (in full) | | |
|---------------------------------|----|------------|
| Grow The Majority | | |
| (b) Address (number and street) | | |
| 228 S Washington St | | |
| Ste 115 | | |
| (c) City, State, and ZIP Code | | |
| Alexandria | VA | 22314-5404 |

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| (a) Name of Committee (in full) | | | |
|---------------------------------|----|------------|--|
| Arizona Victory Fund 2024 | | | |
| (b) Address (number and street) | | | |
| 320 1st St SE | | | |
| (c) City, State, and ZIP Code | | | |
| Washington | DC | 20003-1838 | |
| | | | |

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| (a) Name of Committee (in full) | | |
|---------------------------------|----|------------|
| Scalise Leadership Fund 2024 | | |
| (b) Address (number and street) | | |
| 320 1st St SE | | |
| | | |
| (c) City, State, and ZIP Code | | |
| Washington | DC | 20003-1838 |
| | | |

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(b) Address (number and street)

(c) City, State, and ZIP Code