

Image# 202406269652498888

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Moreno, Bernie, , ,			2. Candidate's FEC Identification Number S4OH00192	
(b) Address (number and street) PO Box 340797		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Columbus OH 43234		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	6. State & District of Candidate OH 00		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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) Bernie Moreno for Senate		
(b) Address (number and street) PO Box 340797		
(c) City, State, and ZIP Code Columbus OH 43234		

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) TEAM MORENO		
(b) Address (number and street) P.O. BOX 340797		
(c) City, State, and ZIP Code COLUMBUS OH 43234		

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 Moreno, Bernie, , ,	Date 06/26/2024
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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)

CORNYN VICTORY COMMITTEE

(b) Address (number and street)

PO Box 13026

(c) City, State, and ZIP Code

Austin

TX

78711

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)

MAJORITY MAKERS FUND

(b) Address (number and street)

421 OFFICE PARK DR

(c) City, State, and ZIP Code

MOUNTAIN BROOK

AL

35223

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)

RECLAIM THE MAJORITY

(b) Address (number and street)

421 Office Park Dr

(c) City, State, and ZIP Code

Mountain Brook

AL

35223

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)

MORENO FOR OH SENATE REPUBLICAN NOMINEE FUND 2024

(b) Address (number and street)

PO BOX 9891

(c) City, State, and ZIP Code

ARLINGTON

VA

22219

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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)

2024 SENATORS CLASSIC COMMITTEE

(b) Address (number and street)

228 S. WASHINGTON STREET
SUITE 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.

(a) Name of Committee (in full)

2024 THUNE REPUBLICAN SENATE VICTORY

(b) Address (number and street)

228 S. WASHINGTON STREET
SUITE 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.

(a) Name of Committee (in full)

BERNIE MORENO FOR OHIO

(b) Address (number and street)

30628 DETROIT RD #184

(c) City, State, and ZIP Code

WESTLAKE OH 44145

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)

WINNING FOR AMERICA FUND

(b) Address (number and street)

101 W ARGONNE DR
#24

(c) City, State, and ZIP Code

SAINT LOUIS MO 63122

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)

TILLIS AND COLLEAGUES VICTORY COMMITTEE

(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.

(a) Name of Committee (in full)

WINNING FOR AMERICA FUND

(b) Address (number and street)

101 W ARGONNE DR
#24

(c) City, State, and ZIP Code

SAINT LOUIS MO 63122

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

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