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FEC FORM 2

STATEMENT OF CANDIDACY

| 1 | (a) Name of Candidate (in full) | | | | | |
|----|--|-------------------|-----------------|-----------------|------------------|---|
| •• | Cornyn, John, , Sen, | | | | | |
| | (b) Address (number and street) PO Box 13026 | | Check if addre | ss changed | | Candidate's FEC Identification Number S2TX00106 |
| | (c) City, State, and ZIP Code | | | | | 3. Is This New Amended |
| | Austin | | TX | 7871 | 1 | Statement (N) OR (A) |
| 4. | Party Affiliation | 5. Office Soug | ght | | 6. State & Dis | trict of Candidate |
| | REPUBLICAN PARTY | Senate | | | TX | |
| | D | ESIGNATIO | N OF PR | INCIPAL | CAMPAIG | N COMMITTEE |
| 7. | I hereby designate the following na | amed political co | ommittee as m | ny Principal (| Campaign Com | mittee for the 2026 (year of election) election(s). |
| | NOTE: This designation should be | filed with the ap | opropriate offi | ce listed in th | ne instructions. | |
| | (a) Name of Committee (in full) | | | | | |
| | Texans for Senator | John Cor | nyn, Inc. | | | |
| | (b) Address (number and street) PO Box 13026 | | | | | |
| | (c) City, State, and ZIP Code | | | | | |
| | Austin | | | | TX | 78711 |
| 8 | | (| Including Join | t Fundraisin | g Representativ | res) mmittee, to receive and expend funds on behalf of my |
| 0. | candidacy. | med committee | , WINOIT IS TVO | т ту ртпогре | ar campaign cor | minutes, to receive and expenditures on bondin or my |
| | NOTE: This designation should be | filed with the pr | incipal campa | ign committe | ee. | |
| | (a) Name of Committee (in full) | | | | | |
| | Cornyn Majority Te | xas | | | | |
| | (b) Address (number and street) 228 S Washington St | | | | | |
| | Suite 115 | | | | | |
| | (c) City, State, and ZIP Code | | | | | |
| | Alexandria | | | | VA | 22314 |
| | I certify that I have ex | ramined this Sta | tement and to | the best of i | my knowledge a | and belief it is true, correct and complete. |
| Si | gnature of Candidate | | | | | Date |
| Co | ornyn, John, , Sen, | | | [Elect | ronically Filed] | 11/05/2020 |
| NC | OTE: Submission of false, erroneou | s, or incomplete | information n | nay subject t | he person signi | ng this Statement to penalties of 2 U.S.C. §437g. |
| | | | | | | |
| | | | | | | |

FEC FORM 2 (REV. 02/2009)

Optional Supplemental Page for Designation of Additional Authorized Committees

| Page | ² of | 5 |
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| i age | O. | |

| 8. | I hereby authorize the following named committee, which is NOT my princ candidacy. NOTE : This designation should be filed with the principal camp | | |
|----|---|----|-------|
| | (a) Name of Committee (in full) | | |
| | Cornyn Majority Committee | | |
| | (b) Address (number and street) 228 S Washington St Suite 115 | | |
| | (c) City, State, and ZIP Code | | |
| | Alexandria | VA | 22314 |
| 8. | I hereby authorize the following named committee, which is NOT my princ candidacy. NOTE : This designation should be filed with the principal camp | | |
| | (a) Name of Committee (in full) SENATE FIREWALL 2020 | | |
| | (b) Address (number and street) 1305 W 11th St, #213 | | |
| | (c) City, State, and ZIP Code | | |
| | Houston | TX | 77008 |
| 8. | I hereby authorize the following named committee, which is NOT my princ candidacy. NOTE: This designation should be filed with the principal came (a) Name of Committee (in full) Cornyn-Perdue Victory Fund | | |
| | (b) Address (number and street) PO Box 3986 | | |
| | (c) City, State, and ZIP Code | | |
| | Washington | DC | 20027 |
| 8. | I hereby authorize the following named committee, which is NOT my princ candidacy. NOTE : This designation should be filed with the principal camp | | |
| | (a) Name of Committee (in full) 2019 SENATORS CLASSIC COMMITTEE | | |
| | (b) Address (number and street) 228 S WASHINGTON ST. | | |
| | STE. 115 | | |
| | (c) City, State, and ZIP Code | | |
| | ALEXANDRIA | VA | 22314 |

Optional Supplemental Page for Designation of Additional Authorized Committees

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| Page | ³ of | Э | |

| 8. | I hereby authorize the following named committee, which is NOT my princi candidacy. NOTE : This designation should be filed with the principal camp | | |
|----|--|-----|-------|
| | (a) Name of Committee (in full) | | |
| | Tillis and Colleagues Victory Committee | | |
| | (b) Address (number and street) 228 S Washington St Suite 115 | | |
| | | | |
| | (c) City, State, and ZIP Code | \/A | 20244 |
| | Alexandria | VA | 22314 |
| 8. | I hereby authorize the following named committee, which is NOT my princic candidacy. NOTE : This designation should be filed with the principal camp | | • |
| | (a) Name of Committee (in full) | | |
| | The Victory Club | | |
| | (b) Address (number and street) PO Box 60148 | | |
| | (c) City, State, and ZIP Code | | |
| | Washington | DC | 20039 |
| 8. | I hereby authorize the following named committee, which is NOT my princi candidacy. NOTE : This designation should be filed with the principal camp (a) Name of Committee (in full) | | |
| | Whitefish Victory | | |
| | (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 princi candidacy. NOTE : This designation should be filed with the principal camp (a) Name of Committee (in full) | | |
| | CORNYN LOEFFLER VICTORY | | |
| | (b) Address (number and street) 824 S MILLEDGE AVE STE 101 | | |
| | (c) City, State, and ZIP Code | | |
| | ATHENS | GA | 30605 |
| | | | |

Optional Supplemental Page for Designation of Additional Authorized Committees

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| i ago | 0. | |

| 3. | I hereby authorize the following named committee, which is NOT my pri candidacy. NOTE : This designation should be filed with the principal ca | | • | |
|----|--|---|---|--|
| | (a) Name of Committee (in full) FRIENDS OF JOHN CORNYN | | | |
| | (b) Address (number and street) PO BOX 60148 | | | |
| | (c) City, State, and ZIP Code | | | |
| | WASHINGTON | DC | 20039 | |
| 3. | I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE : This designation should be filed with the principal ca | | • | |
| | (a) Name of Committee (in full) FRIENDS OF MITT JOINT FUNDRAISING C | OMMITTE | E | |
| | (b) Address (number and street) 138 CONANT STREET, SECOND FLOOR | | | |
| | (c) City, State, and ZIP Code | | | |
| | DEVEDIN | | | |
| | BEVERLY | MA | 01915 | |
| 3. | I hereby authorize the following named committee, which is NOT my pri candidacy. NOTE : This designation should be filed with the principal ca | ncipal campaigr | committee, to receive and expend funds on behalf of my | |
| 3. | I hereby authorize the following named committee, which is NOT my pri | ncipal campaigr | committee, to receive and expend funds on behalf of my | |
| 3. | I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal ca (a) Name of Committee (in full) | ncipal campaigr | committee, to receive and expend funds on behalf of my | |
| 3. | I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal ca (a) Name of Committee (in full) Republican Senate Problem Solvers Fund (b) Address (number and street) 824 S Milledge Ave Ste 101 | ncipal campaigr | committee, to receive and expend funds on behalf of my | |
| 3. | I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal ca (a) Name of Committee (in full) Republican Senate Problem Solvers Fund (b) Address (number and street) 824 S Milledge Ave Ste 101 | ncipal campaigr | committee, to receive and expend funds on behalf of my | |
| | I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal ca (a) Name of Committee (in full) Republican Senate Problem Solvers Fund (b) Address (number and street) 824 S Milledge Ave Ste 101 (c) City, State, and ZIP Code Athens I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal ca (a) Name of Committee (in full) | ncipal campaigr mpaign committ GA ncipal campaigr | committee, to receive and expend funds on behalf of my ee. 30605 committee, to receive and expend funds on behalf of my | |
| | I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal ca (a) Name of Committee (in full) Republican Senate Problem Solvers Fund (b) Address (number and street) 824 S Milledge Ave Ste 101 (c) City, State, and ZIP Code Athens I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal ca (a) Name of Committee (in full) Stay Red 2020 (b) Address (number and street) | ncipal campaigr mpaign committ GA ncipal campaigr | committee, to receive and expend funds on behalf of my ee. 30605 committee, to receive and expend funds on behalf of my | |
| | I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal cate. (a) Name of Committee (in full) Republican Senate Problem Solvers Fund (b) Address (number and street) 824 S Milledge Ave Ste 101 (c) City, State, and ZIP Code Athens I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal cate. (a) Name of Committee (in full) Stay Red 2020 (b) Address (number and street) 228 S WASHINGTON ST. STE. 115 | ncipal campaigr mpaign committ GA ncipal campaigr | committee, to receive and expend funds on behalf of my ee. 30605 committee, to receive and expend funds on behalf of my | |
| | I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal cate. (a) Name of Committee (in full) Republican Senate Problem Solvers Fund (b) Address (number and street) 824 S Milledge Ave Ste 101 (c) City, State, and ZIP Code Athens I hereby authorize the following named committee, which is NOT my pricandidacy. NOTE: This designation should be filed with the principal cate. (a) Name of Committee (in full) Stay Red 2020 (b) Address (number and street) 228 S WASHINGTON ST. | ncipal campaigr mpaign committ GA ncipal campaigr | committee, to receive and expend funds on behalf of my ee. 30605 committee, to receive and expend funds on behalf of my | |

Optional Supplemental Page for Designation of Additional Authorized Committees

| Page | ⁵ of ⁵ | |
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| I aye | O. | |

| | (including John Fundraising Representatives) |
|----|--|
| 3. | 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) |
| | CRUZ SENATE VICTORY 2020 |
| | (b) Address (number and street) PO BOX 341027 |
| | (c) City, State, and ZIP Code |
| | AUSTIN TX 78734 |
| | |
| 3. | 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) |
| | (a) City State and 7ID Code |
| | (c) City, State, and ZIP Code |
| | |
| 3. | 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 |
| | |
| 3. | 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 |