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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Smith, Tina, , ,							
	(b) Address (number and street) P.O. Box 14362	☐ Check if address changed				Candidate's FEC Identification Number     S8MN00578		
	(c) City, State, and ZIP Code					3. Is This New Amended	t	
	Saint Paul		MN	55114		Statement (N) OR (A)		
4.	Party Affiliation	5. Office Sought				rict of Candidate		
	DEMOCRATIC PARTY	Senate			MN			
	DE	SIGNATION C	F PRIN	NCIPAL	CAMPAIG	N COMMITTEE		
7.	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 f	iled with the approp	riate office	e listed in th	e instructions.			
	(a) Name of Committee (in full)							
	Tina Smith for Minn	esota						
	(b) Address (number and street)							
	P.O. Box 14362							
	(c) City, State, and ZIP Code							
	Saint Paul				MN	55114		
	DE	SIGNATION C	F OTH			COMMITTEEC		
				EN AUI	HURIZED	COMMINITIEES		
					HORIZED Representativ			
	I hereby authorize the following nan	(Includ	ding Joint	Fundraisin	g Representativ			
	I hereby authorize the following nan candidacy.	(Included the committee, which	ding Joint	Fundraising	g Representativ	es)		
	I hereby authorize the following nan candidacy.  NOTE: This designation should be f	(Included the committee, which	ding Joint	Fundraising	g Representativ	es)		
	I hereby authorize the following nan candidacy.	(Included the committee, which	ding Joint	Fundraising	g Representativ	es)		
	I hereby authorize the following nan candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  Tina Smith Victory	(Included the committee, which	ding Joint	Fundraising	g Representativ	es)	_	
	I hereby authorize the following nancandidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)	(Included the committee, which	ding Joint	Fundraising	g Representativ	es)		
	I hereby authorize the following nan candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  Tina Smith Victory  (b) Address (number and street)  P.O. Box 14362	(Included the committee, which	ding Joint	Fundraising	g Representativ	es)	_	
	I hereby authorize the following nancandidacy.  NOTE: This designation should be formulated (in full)  Tina Smith Victory  (b) Address (number and street) P.O. Box 14362  (c) City, State, and ZIP Code	(Included the committee, which	ding Joint	Fundraising	g Representatival campaign con	es) nmittee, to receive and expend funds on behalf of my		
	I hereby authorize the following nan candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  Tina Smith Victory  (b) Address (number and street)  P.O. Box 14362	(Included the committee, which	ding Joint	Fundraising	g Representativ	es)		
	I hereby authorize the following nan candidacy.  NOTE: This designation should be formulated (in full)  Tina Smith Victory  (b) Address (number and street) P.O. Box 14362  (c) City, State, and ZIP Code Saint Paul	(Included the committee, which is a committee, and is a committee, a	ding Joint	Fundraising	g Representatival campaign con	es) nmittee, to receive and expend funds on behalf of my		
	I hereby authorize the following nan candidacy.  NOTE: This designation should be formulated (in full)  Tina Smith Victory  (b) Address (number and street) P.O. Box 14362  (c) City, State, and ZIP Code Saint Paul	(Included the committee, which is a committee, and is a committee, a	ding Joint	Fundraising	g Representatival campaign con	es) nmittee, to receive and expend funds on behalf of my  55114		
Sig	I hereby authorize the following nan candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  Tina Smith Victory  (b) Address (number and street) P.O. Box 14362  (c) City, State, and ZIP Code Saint Paul	(Included the committee, which is a committee, and is a committee, a	ding Joint	Fundraising my principal gn committee	g Representatival campaign consee.  MN  my knowledge a	es) nmittee, to receive and expend funds on behalf of my  55114  and belief it is true, correct and complete.		
Sig	I hereby authorize the following nan candidacy.  NOTE: This designation should be formulated (in full)  Tina Smith Victory  (b) Address (number and street) P.O. Box 14362  (c) City, State, and ZIP Code Saint Paul  I certify that I have example of Candidate	(Included the committee, which is a committee, and is a committee, a	ding Joint	Fundraising my principal gn committee	g Representatival campaign con	es) nmittee, to receive and expend funds on behalf of my  55114  and belief it is true, correct and complete.  Date		
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FEC FORM 2 (REV. 02/2009)