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FEC FORM 2

STATEMENT OF CANDIDACY

							=
1.	(a) Name of Candidate (in full)						
	TENNEY, CLAUDIA, , , (b) Address (number and street)	ПС	Check if addre	es channed		2. Candidate's FEC Identification Number	_
	PO BOX 378		oneck ii addre	.33 Changed		H4NY22051	
	(c) City, State, and ZIP Code VICTOR		N,	Y 1456	4	3. Is This New Amended Statement (N) OR (A)	
4.	Party Affiliation	5. Office Sou	ght		6. State & Dist	trict of Candidate	_
	REPUBLICAN PARTY	House			NY	24	
	DE	SIGNATIC	N OF PR	INCIPAL	CAMPAIGI	N COMMITTEE	
7.	I hereby designate the following nar	med political co	ommittee as n	ny Principal	Campaign Comr	mittee for the 2026 election(s). (year of election)	
	NOTE: This designation should be f	iled with the ap	ppropriate offi	ce listed in t	he instructions.		
	(a) Name of Committee (in full)						
	CLAUDIA TENNEY	FOR COI	NGRESS	3			
	(b) Address (number and street)						_
	PO BOX 378						
	(c) City, State, and ZIP Code						_
	VICTOR				NY	14564	
	DE			_	THORIZED ag Representativ	COMMITTEES (res)	
8.	I hereby authorize the following nam	ned committee	, which is NO	T my princip	al campaign cor	mmittee, to receive and expend funds on behalf of my	
	candidacy.						
	NOTE: This designation should be f	iled with the pr	rincipal campa	aign commit	ee.		
	(a) Name of Committee (in full)						_
	CLAUDIA TENNEY	FOR CC	NGRES	S VICT	ORY FUNI	D	
	(b) Address (number and street)						_
	PO BOX 378						
	(c) City, State, and ZIP Code						_
	VICTOR				NY	14564	
	Logitify that I have eva	mined this Sta	stamont and to	a the best of	my knowlodgo s	and belief it is true, correct and complete.	_
C:	gnature of Candidate	IIIIIIeu iiiis Sia	merrierit ariu tu	The best of	Thy knowledge a	Date	_
	_						·
Te	enney, Claudia, , ,					07/07/2025	
N:	OTE: Culturing of falls	ar language to t	inform - H - :	many appleted to	lha mara	no this Statement to penaltics of SUC SUC SUC	_
NC	JIE: Submission of false, erroneous,	or incomplete	information r	nay subject	rne person signii	ng this Statement to penalties of 2 U.S.C. §437g.	_

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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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)					
	IRON LADIES PAC					
	(b) Address (number and street)					
	PO BOX 341027					
	(c) City, State, and ZIP Code					
	AUSTIN	TX	78734			
8.	I hereby authorize the following named committee, which is NOT	my principal campaign	committee, to receive and exp	pend funds on behalf of my		
	candidacy. NOTE: This designation should be filed with the princi			•		
	(a) Name of Committee (in full)					
	TENNEY VAN DUYNE VICTORY FUND					
	(b) Address (number and street) PO BOX 341027					
	(c) City, State, and ZIP Code			-		
	AUSTIN	TX	78734			
8.	I hereby authorize the following named committee, which is NOT candidacy. NOTE: This designation should be filed with the princi (a) Name of Committee (in full) TAKE BACK NEW YORK			end funds on behalf of my		
	(b) Address (number and street) 1390 CHAIN BRIDGE RD STE 515					
	(c) City, State, and ZIP Code					
	MCLEAN	VA	22101			
8.	I hereby authorize the following named committee, which is NOT candidacy. NOTE : This designation should be filed with the princi			end funds on behalf of my		
	(a) Name of Committee (in full)					
	FRONTLINE NEW YORK					
	(b) Address (number and street) PO BOX 183					
	(c) City, State, and ZIP Code					

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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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) GROW THE MAJORITY NY						
	(b) Address (number and street)						
	228 S WASHINGTON ST STE 115						
	(c) City, State, and ZIP Code						
	ALEXANDRIA	VA	22314				
8.	8. I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE : This designation should be filed with the principal campaign		nmittee, to receive and expend funds on behalf of my				
	(a) Name of Committee (in full)						
	GOP WINNING WOMEN 2026						
	(b) Address (number and street) 228 S WASHINGTON ST STE 115						
	(c) City, State, and ZIP Code		·				
	ALEXANDRIA V/	A	22314				
8.	8. I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campaign (a) Name of Committee (in full)		nmittee, to receive and expend funds on behalf of my				
	(b) Address (number and street)						
	(c) City, State, and ZIP Code						
8.	8. I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE : This designation should be filed with the principal campaign		nmittee, to receive and expend funds on behalf of my				
	(a) Name of Committee (in full)						
	(b) Address (number and street)						
	(c) City, State, and ZIP Code						