FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 2

1.	(a) Name of Candidate (in full)						
	Smith, Adrian, , , (b) Address (number and street)	Check if address shanged				2. Candidate's FEC Identification Number	
	1126 Ave A, Suite 6	□ Check if address changed				H6NE03115	
	(c) City, State, and ZIP Code			0000	4 0500	3. Is This New Amended Statement (N) OR X (A)	
_	Scottsbluff	C Office Occurbt	NE	6936	1-3563		
4.	Party Affiliation REPUBLICAN PARTY	5. Office Sought House			6. State & Dist	trict of Candidate 03	
	DE	SIGNATION	OF PRIN	CIPAL	CAMPAIGI		
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election(s).						
	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
	(a) Name of Committee (in full)						
	Adrian Smith for Congress						
	(b) Address (number and street)						
	1126 Avenue A						
	Ste 6						
	(c) City, State, and ZIP Code						
	Scottsbluff				NE	69361-3563	
 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) Adrian Smith Victory Fund							
	Aunan Smith Victor	y Fund					
	(b) Address (number and street)						
	228 S Washington St						
	(c) City, State, and ZIP Code						
	Alexandria				VA	22314-5404	
	Alexandria				•/(22014 0404	
	I certify that I have exa	mined this Statem	ent and to th	e best of	my knowledge a	and belief it is true, correct and complete.	
Signature of Candidate						Date ·	
Smith, Adrian, , ,					12/28/2024		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing 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: