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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
	Kaine, Timothy, Michael, , (b) Address (number and street)		Check if addre	ee chango		2. Candidate's FEC Identification	on Number			
	1490-5A Quarterpath Road #272		neck ii addre	ss changed		S2VA00142	on number			
	(c) City, State, and ZIP Code					3. Is This New	Amended			
	Williamsburg	- 0" 0	VA	2318		()	OR (A)			
4.	Party Affiliation DEMOCRATIC PARTY	5. Office Soug Senate			6. State & Dist	ict of Candidate				
	DEMOCRATIC FARTT	Ochaic	<u> </u>		V//					
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2030 (year of election)									
	NOTE: This designation should be to	iled with the ap	opropriate offi	ce listed in	he instructions.	<u> </u>				
	(a) Name of Committee (in full)									
	Kaine for Virginia									
	(b) Address (number and street)									
	1490-5A Quarterpath Rd #27	2								
	(c) City, State, and ZIP Code									
	Williamburg				VA	23185				
	DE	SIGNATIO	N OF OT	HER AU	THORIZED	COMMITTEES				
		(Including Joir	nt Fundraisi	ng Representativ	es)				
8.	I hereby authorize the following nan candidacy.	ned committee	, which is NO	T my princip	oal campaign cor	mittee, to receive and expend fu	unds on behalf of my			
	NOTE: This designation should be f	iled with the pr	incipal campa	aign commit	tee.					
	(a) Name of Committee (in full)									
	Kaine Victory Fund									
	(b) Address (number and street)									
	1490-5A Quarterpath Rd #272	2								
	(c) City, State, and ZIP Code									
	Williamsburg				VA	23185				
	I certify that I have exa	mined this Sta	tement and to	the best of	mv knowledge a	nd belief it is true, correct and co	omplete.			
6:	·					Date				
Signature of Candidate							•			
K	aine, Timothy, Michael, ,					11/14/2024				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										
	3.3	,		.,		5 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				

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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Page	OI		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8.	candidacy. NOTE : This designation should be filed with the principal campaign committee, to receive and expend funds on behalf of my								
	(a) Name of Committee (in full)								
	Kaine for Common Ground PAC (b) Address (number and street)								
	1490-5A Quarterpath Rd #272								
	(c) City, State, and ZIP Code	1/4	20405						
	Williamsburg	VA	23185						
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)	(a) Name of Committee (in full)							
	Kaine Action Fund								
	(b) Address (number and street)								
	1490-5A Quarterpath Rd #272								
	(c) City, State, and ZIP Code								
	Williamsburg	VA	23185						
8.	. I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campai (a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code		nmittee, to receive and expend funds on behalf of my						
8.	reby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my didacy. NOTE: This designation should be filed with the principal campaign committee. Name of Committee (in full) Address (number and street)								
	(c) City, State, and ZIP Code								