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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Underwood, Lauren, , ,		
(b) Address (number and street) 2758 US Highway 34 Suite B #149		☐ Check if address changed
(c) City, State, and ZIP Code Oswego IL 60543		2. Candidate's FEC Identification Number H8IL14174
4. Party Affiliation DEMOCRATIC PARTY		3. Is This Statement ☐ New (N) OR ☒ Amended (A)
5. Office Sought House		6. State & District of Candidate IL 14

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Lauren Underwood for Congress		
(b) Address (number and street) 2758 US Highway 34 Suite B #149		
(c) City, State, and ZIP Code Oswego IL 60543		

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) 44 Fund		
(b) Address (number and street) PO Box 6586		
(c) City, State, and ZIP Code Arlington VA 22206		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Underwood, Lauren, , , [Electronically Filed]	Date 09/30/2019
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

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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)

Red To Blue Victory Fund

(b) Address (number and street)

430 South Capitol Street SE
2nd Floor

(c) City, State, and ZIP Code

Washington

DC

20002

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)

Nadler Victory Fund

(b) Address (number and street)

200 West 79th Street
#8N

(c) City, State, and ZIP Code

New York

NY

10024

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)

Fox Valley Victory Fund

(b) Address (number and street)

918 Pennsylvania Ave SE

(c) City, State, and ZIP Code

Washington

DC

20003

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)

Frontline Defense Fund

(b) Address (number and street)

918 Pennsylvania Ave SE

(c) City, State, and ZIP Code

Washington

DC

20003

Optional Supplemental Page for Designation
of Additional Authorized CommitteesPage 3 of 4

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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)

Blue Green Victory Fund

(b) Address (number and street)

PO Box 1309

(c) City, State, and ZIP Code

Torrance

CA

90505

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)

Maintaining A Majority

(b) Address (number and street)

918 Pennsylvania Ave SE

(c) City, State, and ZIP Code

Washington

DC

20003

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)

Illinois Democrats 2020

(b) Address (number and street)

918 Pennsylvania Ave SE

(c) City, State, and ZIP Code

Washington

DC

20003

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)

The Big Six

(b) Address (number and street)

918 Pennsylvania Ave SE

(c) City, State, and ZIP Code

Washington

DC

20003

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of Additional Authorized CommitteesPage 4 of 4

FEC Form 2S (Revised 02/2017)

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)

New Wave Women

(b) Address (number and street)

430 S Capitol St SE

(c) City, State, and ZIP Code

Washington

DC

20003

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)

Women's Wave Illinois 2020

(b) Address (number and street)

PO Box 83142

(c) City, State, and ZIP Code

Gaithersburg

MD

20883-3142

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)

(b) Address (number and street)

(c) City, State, and ZIP Code

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