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## FEC FORM 2

## STATEMENT OF CANDIDACY

| 1.   | I. (a) Name of Candidate (in full)  |                                |             |                 |  |                 |            |      |         |
|--|---|--------------------------------|-------------|-----------------|--|-----------------|------------|------|---------|
|  | Vindman, Yevgeny 'Eugene', ,  |                                |             |                 |  |                 |            |      |         |
|  | (b) Address (number and street)<br>4222 Fortuna Center Plz, Ste 664   | ) Address (number and street)  |             |                 | 2. Candidate's FEC Identification Number H4VA07234 |                 |            |      |         |
|  | (c) City, State, and ZIP Code   | ) City, State, and ZIP Code    |             |                 | 3. Is This   | Ne              |            | V    | Amended |
|  | Dumfries  | VA                             | 2202        |                 | Stateme  | ,               | ) OR       | ×    | (A)     |
| 4.   | Party Affiliation DEMOCRATIC PARTY  | 5. Office Sought  House        |             | 6. State & Dist | trict of Candida<br>07                             | ate             |            |      |         |
|  | DE  | SIGNATION OF PRI               | NCIPAL      | CAMPAIGI        |  | TTEE            |            |      |         |
| 7.   | . I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election) |                                |             |                 |  |                 |            |      |         |
|  | (year of election) <b>NOTE:</b> This designation should be filed with the appropriate office listed in the instructions.        |                                |             |                 |  |                 |            |      |         |
|  | (a) Name of Committee (in full)   |                                |             |                 |  |                 |            |      |         |
|  | Vindman for Congress  |                                |             |                 |  |                 |            |      |         |
|  | (b) Address (number and street)   |                                |             |                 |  |                 |            |      |         |
|  | 4222 Fortuna Center Plz, Ste  | 664                            |             |                 |  |                 |            |      |         |
|  | (c) City, State, and ZIP Code   |                                |             |                 |  |                 |            |      |         |
|  | Dumfries  |                                |             | VA              | 22025  |                 |            |      |         |
| (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 find (a) Name of Committee (in full)   | nied with the philicipal campa | ign commit  | ee.<br>         |  |                 |            |      |         |
|  | Schiff Vindman Vict   | ory Fund                       |             |                 |  |                 |            |      |         |
|  |   |                                |             |                 |  |                 |            |      |         |
|  | (b) Address (number and street) One Park Row, 5th Floor   |                                |             |                 |  |                 |            |      |         |
|  | (c) City, State, and ZIP Code   |                                |             |                 |  |                 |            |      |         |
|  | Providence  |                                |             | RI              | 02903  |                 |            |      |         |
|  | I certify that I have exa   | nmined this Statement and to   | the best of | my knowledge a  | and belief it is                                   | true, correct a | and comple | ete. |         |
| Signature of Candidate   |   |                                |             | Date            |  |                 |            |      |         |
| Vindman, Yevgeny 'Eugene', , ,   |   |                                |             |                 | 06/20/202  | 24              |            |      |         |
| 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)

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

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|------|-----------------|---|--|
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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. <b>NOTE</b> : This designation should be filed with the principal campaign committee. |    |  |  |  |  |  |  |
|----|--|----|--|--|--|--|--|--|
|    | (a) Name of Committee (in full)  |    |  |  |  |  |  |  |
|    | Virginia Congressional Victory Fund  |    |  |  |  |  |  |  |
|    | (b) Address (number and street)  |    |  |  |  |  |  |  |
|    | 611 Pennsylvania Ave SE  |    |  |  |  |  |  |  |
|    | Ste 143 (c) City, State, and ZIP Code  |    |  |  |  |  |  |  |
|    | Washington   | DC | 20003  |  |  |  |  |  |
| 8. | I hereby authorize the following named committee, which is NOT my principal  |    | mmittee, to receive and expend funds on behalf of my |  |  |  |  |  |
|    | didacy. NOTE: This designation should be filed with the principal campaign committee.  |    |  |  |  |  |  |  |
|    | (a) Name of Committee (in full)  |    |  |  |  |  |  |  |
|    | 4241   |    |  |  |  |  |  |  |
|    | (b) Address (number and street)  |    |  |  |  |  |  |  |
|    | (c) City, State, and ZIP Code  |    |  |  |  |  |  |  |
|    |  |    |  |  |  |  |  |  |
|    |  |    |  |  |  |  |  |  |
| 8. | I hereby authorize the following named committee, which is NOT my principal candidacy. <b>NOTE</b> : This designation should be filed with the principal campai  |    | mmittee, 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  |    |  |  |  |  |  |  |
|    | (o) Only, State, and Zhi Godo  |    |  |  |  |  |  |  |
|    |  |    |  |  |  |  |  |  |
| 8. | I hereby authorize the following named committee, which is NOT my principal candidacy. <b>NOTE</b> : This designation should be filed with the principal campai  |    | mmittee, to receive and expend funds on behalf of my |  |  |  |  |  |
|    | (a) Name of Committee (in full)  |    |  |  |  |  |  |  |
|    | (a) Hame of committee (iii tail)   |    |  |  |  |  |  |  |
|    | (b) Address (number and street)  |    |  |  |  |  |  |  |
|    | (c) City, State, and ZIP Code  |    |  |  |  |  |  |  |
|    |  |    |  |  |  |  |  |  |