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FEC FORM 2

STATEMENT OF CANDIDACY

| 1. (a) | Name of Candidate (in full) | | | | | | |
|---|--|------------------|---------------|----------|---|---|--|
| /I. \ | Clarke, Yvette, D, , | | الماد الأحادا | aa aheee | | O Condidate o FFC Identification Number | |
| (D) | o) Address (number and street) | | | | Candidate's FEC Identification Number H4NY11138 | | |
| (c) | City, State, and ZIP Code | | | | _ | 3. Is This New Amended | |
| | Brooklyn | | NY | / 1122 | | Statement (N) OR X (A) | |
| | rty Affiliation | 5. Office Sought | | | | trict of Candidate | |
| DI | EMOCRATIC PARTY | House | | | NY | 09 | |
| DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE | | | | | | | |
| 7. I h | 7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election) | | | | | | |
| NC | NOTE: This designation should be filed with the appropriate office listed in the instructions. | | | | | | |
| (a) Name of Committee (in full) | | | | | | | |
| Clarke for Congress | | | | | | | |
| (b) | Address (number and street) | | | | | | |
| | PO Box 250200 | | | | | | |
| (c) | City, State, and ZIP Code | | | | | | |
| | Brooklyn | | | | NY | 11225 | |
| 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 | | | | | | | |
| | | | | | | | |
| 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 | | | | | Date | | |
| Clarke, Yvette, D, , | | | | | 11/24/2024 | | |
| 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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FEC FORM 2 (REV. 02/2009)