

Image# 202601079793921087

PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

| | | |
|--|---|--|
| 1. (a) Name of Candidate (in full) Lin, Marena, , , | | |
| (b) Address (number and street) 1014 Broadway, PMB 1230 | | <input checked="" type="checkbox"/> Check if address changed |
| (c) City, State, and ZIP Code Santa Monica CA 90401 | | 2. Candidate's FEC Identification Number H6CA32256 |
| 4. Party Affiliation DEMOCRATIC PARTY | | 3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A) |
| 5. Office Sought House | 6. State & District of Candidate CA 32 | |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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) MARENA LIN FOR CONGRESS | | |
| (b) Address (number and street) 1 W. Manchester Blvd., Suite 700 | | |
| (c) City, State, and ZIP Code Inglewood CA 90301 | | |

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) | | |
| (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 Ivery, Cine D., , , | Date 01/07/2026 |
|---|--------------------|

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

| | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| | | | | | | | | |
|--|--|--|--|--|--|--|--|--|