Image# 202203219495795102 PAGE 1 / 2

FEC FORM 2

STATEMENT OF CANDIDACY

1 (a) Name of	Candidate (in full)											
, ,	Cory, A., ,											
(b) Address (8 Lombai	number and street)	☐ Check if address changed					Candidate's FEC Identification Number S4NJ00185					
(c) City, State	e, and ZIP Code						This		lew			Amended
Newark	,		N.	07102	2	S	tatemen		N)	OR	×	(A)
4. Party Affiliation	on	5. Office Soug	ght		6. State & Dis	trict of C	andidate	Э				
DEMOCRA	TIC PARTY	Senate			NJ							
	DE	SIGNATIC	N OF PR	INCIPAL	CAMPAIG	N COI	имітт	ΓΕΕ				
7. I hereby desi	gnate the following nar	med political co	mmittee as m	ny Principal (Campaign Com	mittee fo		2026 ear of ele	ction)	electio	on(s).	
NOTE: This	designation should be t	filed with the ap	propriate offi	ce listed in th	ne instructions.							
(a) Name of	Committee (in full)											
Cory	Booker for Ser	nate										
	number and street)											
8 Lomba	•											
Box 346	i											
(c) City, State	e, and ZIP Code											
Newarl	<				NJ	0	7102					
candidacy.	designation should be f				, ,	mmittee,	to recei	ve and ex	xpend	l funds	on be	half of my
	er Victory Fund	d										
	number and street) nsylvania Ave SE											
(c) City. State	e, and ZIP Code											-
Washin					DC	2	0003					
wasiiii	gion				ВС	2	0003					
	I certify that I have exa	mined this Sta	tement and to	the best of i	my knowledge a	and belie	ef it is tru	ie, correc	t and	comple	ete.	
Signature of Ca	andidate					Date						
Booker, Cory, A.	, ,			[Elect	ronically Filed]	03/2	21/2022					
NOTE: Submiss	ion of false, erroneous	, or incomplete	information n	nay subject t	ne person signi	ng this S	Statemer	nt to pena	alties c	of 2 U.S	S.C. §4	137g.
		1			1							

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	2 of	2
rage	OI	

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)
	Booker Gillibrand Victory Fund
	(b) Address (number and street) 600 Pennsylvania Ave SE 15180
	(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)
	(b) Address (number and street)
	(c) City, State, and ZIP Code
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
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