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FEC FORM 2

STATEMENT OF CANDIDACY

1 (a) Nan	ne of Candidate (in full)										
	ib, Rashida, , ,										
(b) Add	ress (number and street) Box 32777	☐ Check if address changed			Candidate's FEC Identification Number H8MI13250						
(c) City	State, and ZIP Code					3. Is This		New			Amended
. , ,	troit		MI	48232	2	Staten		(N)	OR	×	(A)
4. Party A		5. Office Soug			6. State & Dis	trict of Candid					
•	CRATIC PARTY	House			MI	12					
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIG	N COMMI	TTEE				
7. I hereb	y designate the following nar	med political co	mmittee as m	y Principal (Campaign Com	mittee for the	2024 (year of ele	ection)	election	on(s).	
NOTE:	This designation should be t	filed with the ap	propriate offic	ce listed in th	ne instructions.						
(a) Nan	ne of Committee (in full)										
R	ashida Tlaib for Co	ongress									
` '	ress (number and street) Box 32777										
(c) City	State, and ZIP Code										
	etroit				MI	48232	2				
	DE	SIGNATIO	N OF OTI	HER AU	THORIZED	COMMIT	TEES				
		(1	ncluding Join	t Fundraisin	g Representativ						
8. I hereb	v authorize the following nan				g Representativ	res)		expend	l funds	on be	half of my
8. I hereby	y authorize the following nan				g Representativ	res)		expend	f funds	on be	half of my
candida	•	ned committee,	which is NO	Γ my principa	g Representativ al campaign cor	res)		expend	l funds	on be	ehalf of my
candida	acy.	ned committee,	which is NO	Γ my principa	g Representativ al campaign cor	res)		expend	funds	on be	ehalf of my
candida NOTE:	acy. This designation should be f	ned committee,	which is NO	Γ my principa	g Representativ al campaign cor	res)		expend	I funds	on be	ehalf of my
candida NOTE: (a) Nan TI	acy. This designation should be formulated from the formulation of the following the following from the foll	ned committee,	which is NO	Γ my principa	g Representativ al campaign cor	res)		expend	I funds	on be	ehalf of my
candida NOTE: (a) Nan TI (b) Add	This designation should be forme of Committee (in full) The Empowerment	ned committee,	which is NO	Γ my principa	g Representativ al campaign cor	res)		expend	I funds	on be	ehalf of my
candida NOTE: (a) Nan TI (b) Add PO	This designation should be forme of Committee (in full) The Empowerment The ress (number and street)	ned committee,	which is NO	Γ my principa	g Representativ al campaign cor	res)		expend	I funds	on be	ehalf of my
candida NOTE: (a) Nan TI (b) Add PO (c) City,	This designation should be forme of Committee (in full) The Empowerment Tress (number and street) Box 1863	ned committee,	which is NO	Γ my principa	g Representativ al campaign cor	res)	eceive and e	expend	i funds	on be	ehalf of my
candida NOTE: (a) Nan TI (b) Add PO (c) City,	This designation should be forme of Committee (in full) The Empowerment Tress (number and street) Box 1863 State, and ZIP Code dianapolis	ned committee, filed with the pri	which is NO	F my principa	g Representatival campaign con	res) mmittee, to re	eceive and e				ehalf of my
candida NOTE: (a) Nan TI (b) Add PO (c) City,	This designation should be forme of Committee (in full) The Empowerment Tress (number and street) Box 1863 The State, and ZIP Code State and Street In the state	ned committee, filed with the pri	which is NO	F my principa	g Representatival campaign con	46206	eceive and e				ehalf of my
candida NOTE: (a) Nan TI (b) Add PO (c) City, Inc	This designation should be forme of Committee (in full) The Empowerment Tress (number and street) Box 1863 State, and ZIP Code Dianapolis I certify that I have example of Candidate	ned committee, filed with the pri	which is NO	F my principa	g Representatival campaign con	46206 And belief it is	eceive and e				ehalf of my
candida NOTE: (a) Nan TI (b) Add PO (c) City,	This designation should be forme of Committee (in full) The Empowerment Tress (number and street) Box 1863 State, and ZIP Code Dianapolis I certify that I have example of Candidate	ned committee, filed with the pri	which is NO	Γ my principal ign committee	g Representatival campaign con	46206 and belief it is Date	eceive and e				ehalf of my
candida NOTE: (a) Nan TI (b) Add PO (c) City, Inc	This designation should be forme of Committee (in full) The Empowerment Tress (number and street) Box 1863 State, and ZIP Code Dianapolis I certify that I have example of Candidate	red committee, filed with the pri	which is NO	T my principal ign committed in the best of the best o	g Representatival campaign conservations IN The second s	46206 and belief it is Date 11/18/20	eceive and e	ct and	compl	ete.	
candida NOTE: (a) Nan TI (b) Add PO (c) City, Inc	This designation should be forme of Committee (in full) The Empowerment Tress (number and street) The Box 1863 The State, and ZIP Code dianapolis The Control of Candidate shida, , ,	red committee, filed with the pri	which is NO	T my principal ign committed in the best of the best o	g Representatival campaign conservations IN The second s	46206 and belief it is Date 11/18/20	eceive and e	ct and	compl	ete.	
candida NOTE: (a) Nan TI (b) Add PO (c) City, Inc	This designation should be forme of Committee (in full) The Empowerment Tress (number and street) The Box 1863 The State, and ZIP Code dianapolis The Control of Candidate shida, , ,	red committee, filed with the pri	which is NO	T my principal ign committed in the best of the best o	g Representatival campaign conservations IN The second s	46206 and belief it is Date 11/18/20	eceive and e	ct and	compl	ete.	

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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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)							
	The Squad Victory Fund							
	(b) Address (number and street) 611 Pennsylvania Ave SE Num 143							
	(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)							
	Resiliency Fund							
	(b) Address (number and street) PO BOX 33079							
	(c) City, State, and ZIP Code							
	Washington DC 20033							
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							