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FEC FORM 2

STATEMENT OF CANDIDACY

1.									
	(a) Name of Candidate (in full)								
	Gluesenkamp Perez, Marie, , ,					10.0 "1		C C 1	
	(b) Address (number and street) PO Box 1164	ЦС	heck if addres	ss changed		2. Candida H2WA	ite's FEC Identi 03217	fication Nu	imber
	(c) City, State, and ZIP Code					3. Is This			Amended
	Washougal		WA	9867		Statem	()	OR	× (A)
4.	Party Affiliation	5. Office Soug	ht		6. State & Dis		date		
	DEMOCRATIC PARTY	House			WA	03			
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIG	N COMMI	TTEE		
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)							n(s).	
	NOTE: This designation should be f	iled with the ap	propriate offic	ce listed in t	he instructions.				
	(a) Name of Committee (in full)								
	Marie for Congress								
	(b) Address (number and street)								
	PO Box 1164								
	(c) City, State, and ZIP Code								
	Washougal				WA	98671			
	DE	SIGNATIO	N OF OTI	HER ALL	THORIZED	COMMIT	TFFS		
					ng Representati		ILLO		
8.	I hereby authorize the following nan	ned committee.	which is NO	T mv princip	al campaign co	mmittee, to re	ceive and expe	nd funds o	on behalf of my
	 I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. 								
	candidacy.								•
	NOTE: This designation should be f	iled with the pr	ncipal campa	ign committ	ee.				ŕ
	•	iled with the pr	ncipal campa	ign commit	ee.				
	NOTE: This designation should be f	<u> </u>							
	NOTE: This designation should be f (a) Name of Committee (in full)	<u> </u>							
	NOTE: This designation should be f (a) Name of Committee (in full) MARIE GLUESENK	<u> </u>							
	NOTE: This designation should be f (a) Name of Committee (in full) MARIE GLUESENK (b) Address (number and street) 401 2ND AVE S STE 303	<u> </u>							
	NOTE: This designation should be f (a) Name of Committee (in full) MARIE GLUESENK (b) Address (number and street) 401 2ND AVE S	<u> </u>							
	NOTE: This designation should be f (a) Name of Committee (in full) MARIE GLUESENK (b) Address (number and street) 401 2ND AVE S STE 303	<u> </u>				98104			
	NOTE: This designation should be f (a) Name of Committee (in full) MARIE GLUESENK (b) Address (number and street) 401 2ND AVE S STE 303 (c) City, State, and ZIP Code	(AMP PE	REZ VIC	TORY	FUND WA		true, correct ar	nd complet	
	NOTE: This designation should be f (a) Name of Committee (in full) MARIE GLUESENK (b) Address (number and street) 401 2ND AVE S STE 303 (c) City, State, and ZIP Code SEATTLE I certify that I have example of the state o	(AMP PE	REZ VIC	TORY	FUND WA		true, correct ar	nd complet	
Siç	NOTE: This designation should be f (a) Name of Committee (in full) MARIE GLUESENK (b) Address (number and street) 401 2ND AVE S STE 303 (c) City, State, and ZIP Code SEATTLE I certify that I have example of Candidate	(AMP PE	REZ VIC	TORY	FUND WA	and belief it is		nd complet	
Siç	NOTE: This designation should be f (a) Name of Committee (in full) MARIE GLUESENK (b) Address (number and street) 401 2ND AVE S STE 303 (c) City, State, and ZIP Code SEATTLE I certify that I have example of the state o	(AMP PE	REZ VIC	TORY	FUND WA	and belief it is		nd complet	
Siç	NOTE: This designation should be f (a) Name of Committee (in full) MARIE GLUESENK (b) Address (number and street) 401 2ND AVE S STE 303 (c) City, State, and ZIP Code SEATTLE I certify that I have example of Candidate	(AMP PE	REZ VIC	TORY	FUND WA my knowledge	Date 08/24/20	23		te.
Siç	NOTE: This designation should be f (a) Name of Committee (in full) MARIE GLUESENK (b) Address (number and street) 401 2ND AVE S STE 303 (c) City, State, and ZIP Code SEATTLE I certify that I have example of Candidate Suesenkamp Perez, Marie, , ,	(AMP PE	REZ VIC	TORY	FUND WA my knowledge	Date 08/24/20	23		te.
Siç	NOTE: This designation should be f (a) Name of Committee (in full) MARIE GLUESENK (b) Address (number and street) 401 2ND AVE S STE 303 (c) City, State, and ZIP Code SEATTLE I certify that I have example of Candidate Suesenkamp Perez, Marie, , ,	(AMP PE	REZ VIC	TORY	FUND WA my knowledge	Date 08/24/20	23		te.

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	Repr	esentatives	s)

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) KEEP WA BLUE							
	(b) Address (number and street)							
	401 2ND AVE S STE 303							
	(c) City, State, and ZIP Code							
	SEATTLE	WA	98104					
8.	I hereby authorize the following named committee, which is NOT my principal							
	candidacy. NOTE: This designation should be filed with the principal campa	ign committee.						
	(a) Name of Committee (in full)							
	End Citizens United - Priority 2024							
	(b) Address (number and street)							
	122 C STREET NW							
	Ste 360 (c) City, State, and ZIP Code							
	Washington	DC	20001					
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campa (a) Name of Committee (in full) DEMOCRATIC FUTURE LEADERSHIP FUND							
	(b) Address (number and street) PO BOX 15845							
	(c) City, State, and ZIP Code							
	WASHINGTON	DC	20003					
8.	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)							
	NY WA VICTORY FUND							
	(b) Address (number and street) 401 2ND AVE S							
	STE 303							
	(c) City, State, and ZIP Code	10/0	00404					
	SEATTLE	WA	98104					

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)						
	PRO-NORMAL PARTY VICTORY FUND						
	(b) Address (number and street)						
	401 2ND AVE S						
	STE 303 (c) City, State, and ZIP Code	-					
	SEATTLE WA 98104						
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						