

Image# 202310029597393157

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) MURRAY, PATTY, , ,		
(b) Address (number and street) PO BOX 3662		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code SEATTLE WA 98124		2. Candidate's FEC Identification Number S2WA00189
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought Senate
		6. State & District of Candidate WA 00
3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2028 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) PEOPLE FOR PATTY MURRAY		
(b) Address (number and street) PO BOX 3662		
(c) City, State, and ZIP Code SEATTLE WA 98124		

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

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 Murray, Patty, , ,	Date 10/02/2023
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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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Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

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)

CORTEZ MASTO, HASSAN, MURRAY VICTORY FUND

(b) Address (number and street)

1751 POTOMAC GREENS DR

(c) City, State, and ZIP Code

ALEXANDRIA

VA

22314

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)

SENATE VICTORY 2023

(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