## FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full)	~~					
Albertson-Corkery, Sarah, Elai			1	0. Opendialetele EEO lalentification Number		
(b) Address (number and street) 2004 Park Drive		ldress changed	I	2. Candidate's FEC Identification Number H4IA02067		
(c) City, State, and ZIP Code				3. Is This New Amended		
Cedar Falls		IA 506	13	Statement X (N) OR (A)		
4. Party Affiliation	5. Office Sought			trict of Candidate		
DEMOCRATIC PARTY	House		IA	02		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE						
7. I hereby designate the following nar	<ol> <li>I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election(s).</li> </ol>					
NOTE: This designation should be f	led with the appropriate	office listed in	the instructions.			
(a) Name of Committee (in full)						
Corkery for Congres	S					
(b) Address (number and street)						
PO Box 808						
(c) City, State, and ZIP Code						
Cedar Falls			IA	50613		
(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						
l certify that I have exa	mined this Statement and	d to the best o	<sup>f</sup> my knowledge a	and belief it is true, correct and complete.		
Signature of Candidate				Date		
Albertson-Corkery, Sarah, Elaine, ,				10/17/2023		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.						

FEC FORM 2 (REV. 02/2009)