## FEC FORM 2 STATEMENT OF CANDIDACY

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| 1.  | (a) Name of Candidate (in full)  |                     |    |  |                 |                   |   |               |          |                |  |
|---|--|---------------------|----|--|-----------------|-------------------|---|---------------|----------|----------------|--|
|   | Sewell, Terri, A., ,   |                     |    |  |                 |                   |   |               |          |                |  |
|   | (b) Address (number and street)<br>PO Box 1964   | d street)           |    |  |                 |                   | 2. Candidate's FEC Identification Number<br>H0AL07086 |               |          |                |  |
|   | ) City, State, and ZIP Code  |                     |    |  |                 | 3. Is Thi         | -<br>   | New           |          | Amended        |  |
|   | Birmingham   | Birmingham AL 35201 |    |  |                 |                   | nent X  | (N) <b>OR</b> |          | (A)            |  |
| 4.  | Party Affiliation  | 5. Office Soug      | ht |  | 6. State & Dist | rict of Candi     | date  |               |          |                |  |
|   | DEMOCRATIC PARTY   | House               |    |  | AL              | 07                |   |               |          |                |  |
| DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE   |  |                     |    |  |                 |                   |   |               |          |                |  |
| 7.  | I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election(s). |                     |    |  |                 |                   |   |               |          |                |  |
|   | NOTE: This designation should be filed with the appropriate office listed in the instructions.                                   |                     |    |  |                 |                   |   |               |          |                |  |
|   | (a) Name of Committee (in full)  |                     |    |  |                 |                   |   |               |          |                |  |
|   | Terri Sewell for Congress  |                     |    |  |                 |                   |   |               |          |                |  |
|   | (b) Address (number and street)<br>PO Box 1964   |                     |    |  |                 |                   |   |               |          |                |  |
|   | (c) City, State, and ZIP Code  |                     |    |  |                 |                   |   |               |          |                |  |
|   | Birmingham   |                     |    |  | AL              | 3520 <sup>2</sup> | 1   |               |          |                |  |
|   |  |                     |    |  |                 |                   |   |               |          |                |  |
| (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  |                     |    |  |                 |                   |   |               |          |                |  |
| 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 Date   |  |                     |    |  |                 |                   |   |               |          |                |  |
| Sewell, Terri, A., , [Electronically Filed]   |  |                     |    |  |                 | 01/09/2023        |   |               |          |                |  |
| NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.   |  |                     |    |  |                 |                   |   |               |          |                |  |
|   |  |                     |    |  |                 |                   |   |               |          |                |  |
|   |  |                     |    |  |                 |                   |   |               |          |                |  |
| <u> </u>  | · · ·  |                     |    |  |                 |                   | 1   | <br>FE        | C FORM 2 | (REV. 02/2009) |  |