

Image# 202202189491797285

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) McBath, Lucia, Kay, Ms.,			2. Candidate's FEC Identification Number H8GA06393	
(b) Address (number and street) 885 Woodstock Rd Suite 430-528		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Roswell GA 30075		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate GA 07		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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) FRIENDS OF LUCY MCBATH		
(b) Address (number and street) 885 WOODSTOCK RD SUITE 430-528		
(c) City, State, and ZIP Code ROSWELL GA 30075		

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) Georgia Blue Victory Fund		
(b) Address (number and street) P.O. Box 699		
(c) City, State, and ZIP Code Ringgold GA 30736		

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 McBath, Lucia, Kay, Ms., <i>[Electronically Filed]</i>	Date 02/18/2022
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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)

Nadler Victory Fund

(b) Address (number and street)

200 West 79th St
#8N

(c) City, State, and ZIP Code

New York

NY

10024

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)

Hold the House PAC

(b) Address (number and street)

119 1st Ave S
Ste 320

(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)

New Wave Women

(b) Address (number and street)

430 S Capitol St SE
2nd Floor

(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)

House Victory Project 2020

(b) Address (number and street)

918 PENNSYLVANIA AVE SE

(c) City, State, and ZIP Code

Washington

DC

20003

Optional Supplemental Page for Designation
of Additional Authorized Committees

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)

Keep GA06 Blue

(b) Address (number and street)

6050 PEACHTREE PARKWAY
SUITE 240-145

(c) City, State, and ZIP Code

NORCROSS GA 30092

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)

Representation Matters: Women of Color on the Frontline

(b) Address (number and street)

910 17TH STREET NW SUITE 925

(c) City, State, and ZIP Code

Washington DC 20006

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