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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Rice, Mark, , ,		
(b) Address (number and street) 1420 N Lake Shore Dr Apt 3A		<input checked="" type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Chicago IL 60610		2. Candidate's FEC Identification Number H4IL08159
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House
6. State & District of Candidate IL 08		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 2026 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) MARK RICE FOR CONGRESS COMMITTEE		
(b) Address (number and street) 363 E. WACKER. DR 2508		
(c) City, State, and ZIP Code CHICAGO IL 60601		

### 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)
(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 Rice, Mark, (Sharon), ,	Date 05/12/2025
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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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