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FEC FORM 2

STATEMENT OF CANDIDACY

_	() NI		() (II)									
1.		of Candidate Kirsten, , ,	(in full)									
			nd etraat)	ПС	hack if addra	es changed		2 Candida	ata's FFC Idan	tification	Num	nher.
(b) Address (number and street) PO Box 40721			☐ Check if address changed			Candidate's FEC Identification Number H2AZ02311						
		ate, and ZIP	Code				_	3. Is This				Amended
	Tucso				AZ	8571		Stater) OR		× (A)
4.	Party Affilia			5. Office Soug	ght		6. State & Dis		date			
	DEMOCR	ATIC PART	Υ	House			AZ	06				
	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)											
	NOTE: This	s designatior	n should be f	iled with the ap	opropriate offi	ce listed in th	ne instructions.					
	(a) Name o	of Committee	(in full)									
	Eng	el for Ar	izona									
	(b) Address	s (number ar	nd street)									
	PO Bo	ox 40721										
	(c) City, Sta	ate, and ZIP	Code									
	Tucs	on					AZ	85717	7			
			DE	SIGNATIO	N OF OT		THORIZED	COMMIT	TEEC			
			DE				g Representati		IEES			
							- '	•				
8.	I hereby au candidacy.	ithorize the f	ollowing nam	ned committee	, which is NO	Γ my principa	al campaign co	mmittee, to re	eceive and exp	end fun	ds on	behalf of my
	NOTE: This	s designatior	n should be f	iled with the pr	incipal campa	ign committe	ee.					
	(a) Name o	of Committee	(in full)									
	Kirsten Engel Victory Fund											
	(b) Address	s (number ar	nd street)									
	РО Во	x 40721										
	(c) City, Sta	ate, and ZIP	Code									
	Tucso	n					AZ	85717				
		I certify tha	at I have exa	mined this Sta	tement and to	the best of i	my knowledge	and belief it is	s true, correct	and com	plete	
Sig	gnature of	Candidate						Date				
Engel, Kirsten, , ,					10/22/2024							
Li	igei, Kirsien	,,,						10/22/20				
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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FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	² of	3	
raye	O I		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

	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)								
	Take Back The House 2024								
	(b) Address (number and street)								
	600 Pennsylvania Ave SE								
	#15180 (c) City, State, and ZIP Code								
	Washington	DC	20003						
	Tradining.com								
	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 2024								
	(b) Address (number and street)			_					
	600 Pennsylvania Ave SE								
	#15180			_					
	(c) City, State, and ZIP Code								
	Washington	DC	20003						
8.	I hereby authorize the following named committee, which is NOT my prin candidacy. NOTE: This designation should be filed with the principal car (a) Name of Committee (in full) Democracy Summer Majority Fund (b) Address (number and street)		-	<i>'</i> -					
	600 Pennsylvania Ave SE								
	#15180			_					
	(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)								
	Nadler Victory Fund			_					
	(b) Address (number and street) 200 West 79th Street #8N			_					
	(c) City, State, and ZIP Code								
	New York	NY	10024						

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	³ of	3	
raye	O I		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

		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) Gallego Engel Victory Fund								
	(b) Address (number and street)								
	P.O. Box 65322								
	(c) City, State, and ZIP Code								
	Washington	DC	20035						
	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)								
	Elect Democratic Women 2024								
	(b) Address (number and street) 600 Pennsylvania Ave SE #15180								
	(c) City, State, and ZIP Code			_					
	Washington	DC	20003						
	I hereby authorize the following named committee, which is N candidacy. NOTE: This designation should be filed with the properties (a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code			nd funds on behalf of my					
	I hereby authorize the following named committee, which is N candidacy. NOTE : This designation should be filed with the proof (a) Name of Committee (in full)		•	nd funds on behalf of my					
	(b) Address (number and street)								