

Image# 202512169793511371

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# FEC FORM 2

## STATEMENT OF CANDIDACY

|   |  |  |
|---|--|--|
| 1. (a) Name of Candidate (in full)<br>Markey, Edward, , Sen., |  |  |
| (b) Address (number and street)<br>PO Box 69                  |  | <input checked="" type="checkbox"/> Check if address changed   |
| (c) City, State, and ZIP Code<br>Medford MA 02155             |  | 2. Candidate's FEC Identification Number<br>S4MA00028  |
| 4. Party Affiliation<br>DEMOCRATIC PARTY                      |  | 5. Office Sought<br>Senate   |
| 6. State & District of Candidate<br>MA                        |  | 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)<br>The Markey Committee |  |  |
| (b) Address (number and street)<br>PO Box 69            |  |  |
| (c) City, State, and ZIP Code<br>Medford MA 02155       |  |  |

### 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)<br>Markey Victory Fund |  |  |
| (b) Address (number and street)<br>PO Box 69           |  |  |
| (c) City, State, and ZIP Code<br>Medford MA 02155      |  |  |

*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<br>Markey, Edward, , Sen., | Date<br>12/16/2025 |
|---|--------------------|

**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

|  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|

Optional Supplemental Page for Designation  
of Additional Authorized CommitteesPage 2 of 2

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)

Blue Senate 2026

(b) Address (number and street)

600 Pennsylvania Ave, SE  
Unit 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)

(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

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(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code