

Image# 202411159719987382

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FEC FORM 2

STATEMENT OF CANDIDACY

| | | |
|---|--|--|
| 1. (a) Name of Candidate (in full) Landsman, Greg, , , | | |
| (b) Address (number and street) P.O. Box 413 | | <input type="checkbox"/> Check if address changed |
| (c) City, State, and ZIP Code Cincinnati OH 45201 | | 2. Candidate's FEC Identification Number H2OH01194 |
| 4. Party Affiliation DEMOCRATIC PARTY | | 5. Office Sought House |
| 6. State & District of Candidate OH 01 | | 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) Landsman for Congress | | |
| (b) Address (number and street) P.O. Box 413 | | |
| (c) City, State, and ZIP Code Cincinnati OH 45201 | | |

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) LANDSMAN VICTORY FUND | | |
| (b) Address (number and street) P.O. BOX 413 | | |
| (c) City, State, and ZIP Code CINCINNATI OH 45201 | | |

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 Landsman, Greg, , , | Date 11/15/2024 |
|---|--------------------|

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 CommitteesPage 2 of 3

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)

END CITIZENS UNITED - PRIORITY 2024

(b) Address (number and street)

122 C STREET NW
SUITE 360

(c) City, State, and ZIP Code

WASHINGTON DC 20001

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)

LANDSMAN MCGARVEY VICTORY FUND

(b) Address (number and street)

ONE PARK ROW, 5TH FLOOR

(c) City, State, and ZIP Code

PROVIDENCE RI 02903

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)

END CITIZENS UNITED - PRIORITY 2024

(b) Address (number and street)

122 C STREET NW
SUITE 360

(c) City, State, and ZIP Code

WASHINGTON DC 20001

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)

LANDSMAN MCGARVEY VICTORY FUND

(b) Address (number and street)

ONE PARK ROW, 5TH FLOOR

(c) City, State, and ZIP Code

PROVIDENCE RI 02903

Optional Supplemental Page for Designation
of Additional Authorized CommitteesPage 3 of 3

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)

DEMOCRACY SUMMER 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 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

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