## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Ragge, Claire, , ,								
	(b) Address (number and street) 555 S Barrington Ave #227	☐ Check if address changed			Candidate's FEC Identification Number H2CA33212				
	(c) City, State, and ZIP Code					3. Is This	New	Amended	
	Los Angeles		CA	9004	9	Statement (	N) OR	<b>x</b> (A)	
4.	Party Affiliation	5. Office Sough	t		6. State & Dist	rict of Candidate			
	REPUBLICAN PARTY	House			CA	36			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full)								
	Claire Ragge for Co	ngress 202	22						
	(b) Address (number and street) 3843 S Bristol St #604								
	(c) City, State, and ZIP Code								
	Santa Ana				CA	92704			
	DE	SIGNATION	OF OTH	IER AU	THORIZED	COMMITTEES			
(Including Joint Fundraising Representatives)									
8	8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my								
0.	candidacy.	ned committee, v	VIIIOII 13 140 1	тту рттогр	ar oampaigir oon	minico, to receive and e	Aperia farias	on bendir of my	
	NOTE: This designation should be filed with the principal campaign committee.								
(a) Name of Committee (in full)									
	(1) A 11 (1)								
(b) Address (number and street)									
(c) City, State, and ZIP Code									
	I certify that I have exa	mined this State	ment and to	the best of	my knowledge a	and belief it is true, correc	ct and comple	te.	
Si	gnature of Candidate					Date			
Ragge, Claire									
	30-7 777			[Elect	tronically Filed]	12/28/2021			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									
	JIL. Submission of faise, enomeous	, or incomplete in		ay oabjoor t	ne person signii	ig this otatement to pent	aities 01 2 0.0	.C. §437g.	
	JIL. Submission of faise, enoneous,	, or incomplete ii			The person signif	lig tills Statement to pent	11103 01 2 0.0	S.C. §437g.	
	JIL. Submission of false, enoneous.	, or incomplete ii			The person signif	ig this statement to pone	0120.0	.C. §437g.	

FEC FORM 2 (REV. 02/2009)

## : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F2A Transaction ID:

Redistricting changed district number

Form/Schedule: Transaction ID: