

Image# 202209269531992399

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) MCLEOD-SKINNER, JAMIE, , ,			2. Candidate's FEC Identification Number H8OR02161	
(b) Address (number and street) 12986 SW WHEAT GRASS RD		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code TERREBONNE OR 97760		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate OR 05		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 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) JAMIE FOR OREGON		
(b) Address (number and street) 1327 SE TACOMA ST #247		
(c) City, State, and ZIP Code PORTLAND OR 97202		

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) HOUSE VICTORY PROJECT 2022		
(b) Address (number and street) 600 PENNSYLVANIA AVE SE #15180		
(c) City, State, and ZIP Code WASHINGTON DC 20003		

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 McLeod-Skinner, Jamie, , , <i>[Electronically Filed]</i>	Date 09/26/2022
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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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Optional Supplemental Page for Designation
of Additional Authorized Committees

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)

JAMIE VICTORY FUND

(b) Address (number and street)

1327 SE TACOMA ST
247

(c) City, State, and ZIP Code

PORTLAND OR 97202

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