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### FEC FORM 2

#### STATEMENT OF CANDIDACY

	ame of Candidate (in full)								
	hitesides, George, , ,					100 111		<i>c</i>	
	Idress (number and street) .O. Box 221776	ЦС	heck if addre	ss cnanged		2. Candida H4CA2	ate's FEC Identi 27111	tication Nu	mber
` '	ty, State, and ZIP Code				_	3. Is This			Amended
	lewhall		C.A.	9132		Staten	. ,	OR	× (A)
•	Affiliation	5. Office Soug	jht		6. State & Dist		date		
DEM	OCRATIC PARTY	House			CA	27			
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIGI	N COMM	ITTEE		
7. I here	by designate the following na	med political co	mmittee as n	ny Principal	Campaign Comr	mittee for the	2024 (year of election	election on)	n(s).
	: This designation should be	filed with the ap	propriate offi	ce listed in t	ne instructions.				
(a) Na	ame of Committee (in full)								
(	George Whitesides	for Congr	ess						
(b) Ac	Idress (number and street)								
F	P.O. Box 221776								
(c) Cit	ty, State, and ZIP Code								
	Newhall				CA	91322	2		
	DE	SIGNATIO	N OF OT	HER AU	THORIZED	COMMIT	TEES		
		(	Including Joir	nt Fundraisin	g Representativ	res)			
9 I horo	by authorize the following nar	ned committee	which is NO	T my princip	al campaign cor	mmittee to re	acaive and eyne	and funds o	n hehalf of my
candi	•	nea committee,	WIIICII IS INO	i iliy pililcip	ai campaigii coi	minitee, to re	sceive and expe	ina ranas c	in benail of my
NOTE	:: This designation should be	iled with the pr	incipal campa	ign committ	ee.				
(a) Na	ame of Committee (in full)								
3	314 ACTION IMPA	CT SLATI	<b>=</b>						
(b) Ac	Idress (number and street)								
Р	O BOX 14560								
(c) Cit	ty, State, and ZIP Code								
٧	VASHINGTON				DC	20044			
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.									
Signatur	e of Candidate					Date			
Whitesid	les, George, , ,					07/10/20	24		
	,								
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

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#### **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**

(	Includina	Joint	Fundraising	Ren	resentativ	es)

8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	WHITESIDES VICTORY FUND					
	(b) Address (number and street)					
	PO BOX 22177					
	(c) City, State, and ZIP Code					
	NEWHALL	CA	91322			
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. <b>NOTE</b> : This designation should be filed with the principal campa					
	(a) Name of Committee (in full)					
	WHITESIDES VICTORY FUND					
	(b) Address (number and street)					
	PO BOX 22177					
	(c) City, State, and ZIP Code					
	NEWHALL	CA	91322			
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campa  (a) Name of Committee (in full)  CALIFORNIA HOUSE MAJORITY FUND					
	(b) Address (number and street) 499 S CAPITOL ST SW					
	SUITE 420					
	(c) City, State, and ZIP Code	<b>D</b> O	00000			
	WASHINGTON	DC	20003			
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. <b>NOTE</b> : This designation should be filed with the principal campa					
	(a) Name of Committee (in full)					
	BLUE TO THE FUTURE 2024					
	(b) Address (number and street) 430 SOUTH CAPITOL STREET SE					
	2ND FLOOR (c) City, State, and ZIP Code					
	WASHINGTON	DC	20003			

FEC Form 2S (Revised 02/2017)

# Optional Supplemental Page for Designation of Additional Authorized Committees

Page	<sup>3</sup> of	3
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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES** 

	(Including Joint Fundraising F	Representative	es)			
3.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	DEMOCRACY SUMMER MAJORITY FUND					
	(b) Address (number and street) 600 PENNSYLVANIA AVE SE #15180					
	(c) City, State, and ZIP Code					
	WASHINGTON	DC	20003			
3.	<ol> <li>I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campaign</li> </ol>		mittee, to receive and expend funds on behalf of my			
	(a) Name of Committee (in full)					
	SERVE AMERICA VICTORY FUND					
	(b) Address (number and street) PO BOX 2013					
	(c) City, State, and ZIP Code					
	SALEM	ИΑ	01970			
3.	3. I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campaign		mittee, to receive and expend funds on behalf of my			
	(a) Name of Committee (in full)					
	(b) Address (number and street)		_			
	(c) City, State, and ZIP Code					
5	2. I haveby authorize the following named committee, which is NOT my principal of	nomnoian oom	mittee, to receive and expend funds on hehalf of my			
э.	<ol><li>I hereby authorize the following named committee, which is NOT my principal c candidacy. NOTE: This designation should be filed with the principal campaign</li></ol>		militee, to receive and expend funds on behalf of my			
	(a) Name of Committee (in full)					
	(b) Address (number and street)					
	(c) City, State, and ZIP Code					