FEC FORM 2

STATEMENT OF CANDIDACY

							_
1.	(a) Name of Candidate (in full)						
	Porter, Katherine, , ,					T	
	(b) Address (number and street) PO Box 5176		heck if addre	ess changed		Candidate's FEC Identification Number H8CA45130	
	(c) City, State, and ZIP Code					3. Is This New Amended	_
	Irvine		C	A 926	17	Statement (N) OR (A)	
4.	Party Affiliation	5. Office Soug	jht		6. State & Distr	rict of Candidate	_
	DEMOCRATIC PARTY	House			CA	47	_
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE						
7.	I hereby designate the following nar	med political co	mmittee as r	my Principal	Campaign Comn	nittee for the 2024 election(s). (year of election)	
	NOTE: This designation should be f	iled with the ap	propriate off	ice listed in	the instructions.		
	(a) Name of Committee (in full)						
	Katie Porter for Con	gress					
	(b) Address (number and street) PO Box 5176						
	(c) City, State, and ZIP Code						
	Irvine				CA	92617	
							_
	DE				THORIZED ng Representative	COMMITTEES es)	
8.	I hereby authorize the following nam	ned committee.	which is NO	T my princi	oal campaign com	nmittee, to receive and expend funds on behalf of my	
	candidacy.			, , ,	, ,	•	
	NOTE: This designation should be f	iled with the pr	incipal camp	aign commit	tee.		
	(a) Name of Committee (in full)						_
	California Candidate	es Victory	Fund				
	(b) Address (number and street) 777 S. Figueroa St.						_
	Ste. 4050						
	(c) City, State, and ZIP Code						_
	•				CA	00047	
	Los Angeles				CA	90017	
	I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.						
Sig	Signature of Candidate Date						
	Porter, Katherine			11/16/2022			
				[Elec	tronically Filed]	11/10/2022	
NC	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(Including Joint Fundraising Representatives)

8.	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)						
	Lofgren Victory Fund						
	(b) Address (number and street) c/o Contribution Solutions LLC 1346 The Alameda #7-380						
	(c) City, State, and ZIP Code						
	San Jose	CA	95126				
8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. NOTE : This designation should be filed with the principal campaign committee.						
	(a) Name of Committee (in full)						
	Takano California Wave						
	(b) Address (number and street) PO Box 15320						
	(c) City, State, and ZIP Code						
	Washington	DC	20003				
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal camp						
	(a) Name of Committee (in full) Katie Porter Victory Fund						
	(b) Address (number and street) 611 Pennsylvania Ave SE						
	Ste 143						
	(c) City, State, and ZIP Code						
	Washington	DC	20003				
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campoon (a) Name of Committee (in full) Nadler Victory Fund						
	(b) Address (number and street) 200 W 79th St						
	#8N						
	(c) City, State, and ZIP Code	NIV	40004				
	New York	NY	10024				

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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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 be candidacy. NOTE : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)				
	Democracy Defenders				
	(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 of candidacy. NOTE: This designation should be filed with the principal campaign 	nmittee, to receive and expend funds on behalf of my			
	(a) Name of Committee (in full) SEEC Victory Fund				
	(b) Address (number and street) PO Box 15320				
	(c) City, State, and ZIP Code				
	Washington	OC	20003		
8.	3. I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campaign (a) Name of Committee (in full) House Victory Project 2022		nmittee, to receive and expend funds on behalf of my		
	(b) Address (number and street) 600 Pennsylvania Ave SE #15180				
	(c) City, State, and ZIP Code				
	Washington	C 2	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				