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FEC FORM 2

STATEMENT OF CANDIDACY

							=			
1. ((a) Name of Candidate (in full)									
	Budzinski, Nikki, , ,					O Condidatela FFO Identification Number	_			
((b) Address (number and street) PO Box 5171	ЦС	check if addre	ss changed		Candidate's FEC Identification Number H2IL13153				
((c) City, State, and ZIP Code					3. Is This New Amended				
	Springfield		IL	6270	5	Statement (N) OR X (A)				
	Party Affiliation	5. Office Soug	ght			trict of Candidate				
	DEMOCRATIC PARTY	House			IL	13				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7. I	hereby designate the following nar	med political co	mmittee as m	ny Principal (Campaign Com	mittee for the 2026 election(s). (year of election)				
	NOTE: This designation should be f	filed with the ap	propriate offi	ce listed in t	ne instructions.		_			
((a) Name of Committee (in full)									
	Nikki for Congress									
((b) Address (number and street)									
	PO Box 5171									
((c) City, State, and ZIP Code						_			
	Springfield				IL	62705				
							_			
	DE	SIGNATIO	N OF OT	HER AU	THORIZED	COMMITTEES				
		(Including Joir	nt Fundraisin	g Representati	ves)				
я І	hereby authorize the following pan	ned committee	which is NO	T my princip	al campaign co	mmittee, to receive and expend funds on behalf of my				
	candidacy.	ned committee	, WIIICH IS IVO	i iliy pililoip	ai campaigir co	minimee, to receive and expend funds on behalf of my				
ı	NOTE: This designation should be f	iled with the pr	incipal campa	aign committe	ee.					
((a) Name of Committee (in full)						_			
	Budzinski Victory F	und								
((b) Address (number and street)						_			
	PO Box 5171									
((c) City, State, and ZIP Code						_			
	Springfield				IL	62705				
	I certify that I have exa	mined this Sta	tement and to	the best of	my knowledge	and belief it is true, correct and complete.				
Sig	nature of Candidate					Date	_			
Budzinski, Nikki, , ,					07/29/2025					
							_			
NO	TE: Submission of false, erroneous	, or incomplete	information n	nay subject t	he person signi	ing this Statement to penalties of 2 U.S.C. §437g.	_			
NO.	TE: Submission of false, erroneous	, or incomplete	information n	nay subject t	he person sign	ing this Statement to penalties of 2 U.S.C. §437g.	<u> </u>			
NO.	TE: Submission of false, erroneous	, or incomplete	information n	nay subject t	he person signi	ing this Statement to penalties of 2 U.S.C. §437g.	_			

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	² of	2	
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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

	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)									
	Illinois Victory Fund									
	(b) Address (number and street)									
	600 Pennsylvania Ave SE Unit 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									
	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									