

Image# 202411149719971465

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Levin, Mike, , ,			2. Candidate's FEC Identification Number H8CA49058	
(b) Address (number and street) PO Box 2112		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Capistrano Beach CA 92624		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate CA 49		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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) <b>Mike Levin for Congress</b>		
(b) Address (number and street) PO Box 2112		
(c) City, State, and ZIP Code Capistrano Beach CA 92624		

### 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) <b>Levin Victory Fund 2024</b>		
(b) Address (number and street) 600 Pennsylvania Ave SE Unit 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 <i>Levin, Mike, , ,</i>	Date 11/14/2024
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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)

**SEEC Victory Fund**

(b) Address (number and street)

1 Park Row  
Fl 5

(c) City, State, and ZIP Code

Providence RI 02903

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)

**Democracy Summer 2024**

(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)

**Southern Calif4nia 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)

**End Citizens United - Urgent 2024**

(b) Address (number and street)

122 C St NW  
Ste 360

(c) City, State, and ZIP Code

Washington DC 20001