

Image# 202604049856981472

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Schiarizzi, Joseph, , ,			2. Candidate's FEC Identification Number H6VA07296	
(b) Address (number and street) 2043 Wilson Blvd PO Box 17207		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Arlington VA 22216		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 VA 07		

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) Schiarizzi for Congress		
(b) Address (number and street) 2043 Wilson Blvd PO Box 17207		
(c) City, State, and ZIP Code Arlington VA 22216		

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) Address (number and street)		
(c) City, State, and ZIP Code		

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 Schiarizzi, Joseph, , ,	Date 04/04/2026
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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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