FEC FORM 2 STATEMENT OF CANDIDACY

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| 1. | (a) Name of Candidate (in full) | | | | | | | | |
|----|--|--|--------------------|-------------------|---|--------------|-----------------|-----------------|--|
| | Rab, Aejaz (Raji), , , | | | | | | | | |
| | (b) Address (number and street) 7634 Foxboro Ln | Address (number and street) 7634 Foxboro Ln | | | 2. Candidate's FEC Identification Number S4CA00613 | | | | |
| | (c) City, State, and ZIP Code | | | | 3. Is This | Ne | W | Amended | |
| | West Hills CA | | | 17 | Statement | X (N) |) OR (A) | | |
| 4. | Party Affiliation | 5. Office Sought | | 6. State & Dist | rict of Candidate | | | | |
| | Dem | Senate | | CA | 00 | | | | |
| | DI | ESIGNATION OF P | RINCIPAL | CAMPAIGN | | ΈE | | | |
| 7. | hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election(s). | | | | | | | | |
| | NOTE: This designation should be | filed with the appropriate of | office listed in t | he instructions. | | | | | |
| | (a) Name of Committee (in full) | | | | | | | | |
| | Raji Rab for U.S. S | enate | | | | | | | |
| | (b) Address (number and street) 22736 Vanowen Street | | | | | | | | |
| | Suite 105 Sen Sec | | | | | | | | |
| | (c) City, State, and ZIP Code | | | | | | | | |
| | West Hills | | | CA | 91307 | | | | |
| | DI | ESIGNATION OF O | THER AU | THORIZED | СОММІТТЕ | ES | | | |
| | | (Including J | oint Fundraisir | ng Representativ | es) | | | | |
| 0 | I haraby outbarize the following pe | mad committee, which is N | | | amittaa ta raaaiy | | and funda | on bobalf of my | |
| о. | I hereby authorize the following na candidacy. | med committee, which is N | iOT my princip | ai campaign con | infillee, to recen | e and exp | | on behall of my | |
| | NOTE: This designation should be | filed with the principal cam | paign commit | ee. | | | | | |
| | (a) Name of Committee (in full) | | | | | | | | |
| | | | | | | | | | |
| | (b) Address (number and street) | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | (c) City, State, and ZIP Code | | | | | | | | |
| | | | | | | | | | |
| - | | | | , , , | | | | | |
| | - | amined this Statement and | to the best of | my knowledge a | nd bellet it is tru | e, correct a | and comple | ete. | |
| Si | gnature of Candidate | | | | Date | | | | |
| R | ab, Aejaz (Raji), , , | | [Elec | tronically Filed] | 03/20/2023 | | | | |
| | | | | | | | | | |
| N | OTE: Submission of false, erroneous | s, or incomplete information | n may subject | the person signir | ng this Statemen | t to penalti | es of 2 U.S | | |
| _ | | | | | | | | S.C. §437g. | |
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