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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Ortiz, Oscar, , , (b) Address (number and street)	☐ Check if address changed			1	2. Candidate's FEC Identification Number		
	P.O. Box 1559	□ Crieck ii address changed			1	H4CA25248		
	(c) City, State, and ZIP Code					ew Amended		
	Indio	- 0" -	C	A 922		Statement X (N	I) OR (A)	
4.	Party Affiliation DEMOCRATIC PARTY	5. Office Soug House	ht		6. State & Dist	rict of Candidate 25		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 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)							
	Oscar Ortiz for Congress							
	(b) Address (number and street)							
	P.O. Box 1559							
	(c) City, State, and ZIP Code							
	Indio				CA	92202		
(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)								
	(a) Name of Committee (in rail)							
(b) Address (number and street)								
(c) City, State, and ZIP Code								
		mined this Stat	ement and to	o the best o	f my knowledge a	and belief it is true, correct	and complete.	
Signature of Candidate					Date			
Ortiz, Oscar, , ,					11/28/2023			
NO	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)