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#### FEC FORM 2

#### STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)											
	SYKES, EMILIA, , ,											
	(b) Address (number and street) 109 N HOWARD ST UNIT A		Check if addre	ess chan	ged			ate's FEC Id I13264	entifica	ation Nur	nber	
	(c) City, State, and ZIP Code						3. Is Thi	s 1	New			Amended
	AKRON		0	H 4	4308		State	ment (	(N)	OR	×	(A)
4.	Party Affiliation	5. Office Sou	ght			6. State & Dist	rict of Candi	idate				
	DEMOCRATIC PARTY	House				OH	13					
	DE	SIGNATIC	N OF PR	INCIP	AL	CAMPAIGN	N COMM	ITTEE				
7.	I hereby designate the following nar	med political co	ommittee as i	my Princi	pal C	ampaign Comr	mittee for the	2024 (year of ele	ection)	election	(s).	
	NOTE: This designation should be to	iled with the ap	ppropriate off	ice listed	l in th	e instructions.						
	(a) Name of Committee (in full)											
	EMILIA SYKES FOR	R CONGF	RESS									
	(b) Address (number and street)											
	545 E TOWN ST											
	(c) City, State, and ZIP Code											
	COLUMBUS					ОН	4321	5				
	DE					HORIZED Representativ		TEES				
8.	I hereby authorize the following nan candidacy.	ned committee	, which is NC	T my pri	ncipa	l campaign con	nmittee, to r	eceive and e	expend	funds or	n beh	alf of my
	NOTE: This designation should be filed with the principal campaign committee.											
	(a) Name of Committee (in full)											
	REPRESENTATION MATTERS: BUILD THE HOUSE											
	(b) Address (number and street)											
	910 17TH ST NW STE 925											
	(c) City, State, and ZIP Code											
	WASHINGTON					DC	20006	6				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.												
Si	gnature of Candidate						Date					
Sykes, Emilia, , ,				03/18/2024								
٥.	ykes, Emilia, , ,						03/10/20	)Z4				
N	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)

FEC Form 2S (Revised 02/2017)

# Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)								
3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.							
	Name of Committee (in full)							
	EMILIA SYKES OHIO VICTORY FUND							
	(b) Address (number and street) P.O. BOX 1347							
	(c) City, State, and ZIP Code							
	AKRON	ОН	44309					
}.	I hereby authorize the following named committee, which is NOT my princip candidacy. <b>NOTE</b> : This designation should be filed with the principal campa							
	(a) Name of Committee (in full)							
	LANDSMAN SYKES VICTORY FUND							
	(b) Address (number and street) 122 C STREET NW							
	SUITE 360							
	(c) City, State, and ZIP Code							
	WASHINGTON	DC	20001					
3.	I hereby authorize the following named committee, which is NOT my princip candidacy. <b>NOTE</b> : This designation should be filed with the principal campa (a) Name of Committee (in full)							
	NADLER VICTORY FUND							
	(b) Address (number and street) 200 WEST 79TH STREET, #8N							
	(c) City, State, and ZIP Code							
	NEW YORK	NY	10024					
3.	. 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)							
	SHARICE DAVIDS VICTORY FUND 2022							
	(b) Address (number and street) 13851 WEST 63RD STREET							
	#303 (c) City, State, and ZIP Code							
	SHAWNEE	KS	66216					

FEC Form 2S (Revised 02/2017)

# Optional Supplemental Page for Designation of Additional Authorized Committees

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### **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. <b>NOTE</b> : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	STAND UP FOR DEMOCRACY JFA							
	(b) Address (number and street)							
	PO BOX 5418							
	(c) City, State, and ZIP Code							
	TAKOMA PARK	MD	20913					
8.	I hereby authorize the following named committee, which is NOT my princ candidacy. <b>NOTE</b> : This designation should be filed with the principal camp							
	(a) Name of Committee (in full)		_					
	DEMOCRATIC FUTURE LEADERSHIP FUND							
	(b) Address (number and street) PO BOX 15845							
	(c) City, State, and ZIP Code							
	WASHINGTON	DC	20003					
8.	I hereby authorize the following named committee, which is NOT my princ candidacy. NOTE: This designation should be filed with the principal camp  (a) Name of Committee (in full)  DEMOCRACY SUMMER 2024							
	(b) Address (number and street) 600 PENNSYLVANIA AVE SE #15180							
	(c) City, State, and ZIP Code							
	WASHINGTON	DC	20003					
<ol> <li>I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf candidacy. NOTE: This designation should be filed with the principal campaign committee.</li> </ol>								
	(a) Name of Committee (in full)							
	BLUE TO THE FUTURE 2024							
	(b) Address (number and street) 430 SOUTH CAPITOL STREET SE							
	2ND FLOOR							
	(c) City, State, and ZIP Code							
	WASHINGTON	DC	20003					