

Image# 202401259600284534

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Strickland, Marilyn, , ,		
(b) Address (number and street) 4250 Martin Way E STE 105, PmB 163		<input checked="" type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Olympia WA 98516		2. Candidate's FEC Identification Number H0WA10034
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought House
		6. State & District of Candidate WA 10
3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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>STRICKLAND FOR WASHINGTON</b>		
(b) Address (number and street) 4250 MARTIN WAY E STE 105 PMB 163		
(c) City, State, and ZIP Code OLYMPIA WA 98516		

### 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>CBCPAC-NEWDEM FUND FOR THE MAJORITY</b>		
(b) Address (number and street) 910 17TH ST NW STE 925		
(c) City, State, and ZIP Code WASHINGTON DC 20006		

*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 Strickland, Marilyn, , ,	Date 01/25/2024
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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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