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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Randall, Emily, , ,		
(b) Address (number and street) PO Box 1883		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Port Orchard WA 98366		2. Candidate's FEC Identification Number H4WA06117
4. Party Affiliation DEMOCRATIC PARTY		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
5. Office Sought House	6. State & District of Candidate WA 06	

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) Emily Randall for Congress		
(b) Address (number and street) PO Box 1883		
(c) City, State, and ZIP Code Port Orchard WA 98366		

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) EQUALITY CONGRESS		
(b) Address (number and street) PO BOX 15320		
(c) City, State, and ZIP Code WASHINGTON DC 20003		

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 Randall, Emily, , ,	Date 01/23/2026
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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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Optional Supplemental Page for Designation
of Additional Authorized CommitteesPage 2 of 2

FEC Form 2S (Revised 02/2017)

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)

EMILY RANDALL VICTORY FUND

(b) Address (number and street)

401 2ND AVE S
STE 303

(c) City, State, and ZIP Code

SEATTLE

WA

98104

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

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(b) Address (number and street)

(c) City, State, and ZIP Code