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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
	Lorenzen, Mark, , ,									
	(b) Address (number and street) 10400 Calaveras	☐ Check if address changed				Candidate's FEC Identification Number H4TX17114				
	(c) City, State, and ZIP Code						lew		nended	
	Waco	TX 76708				`	N) OR	(A)		
4.	Party Affiliation DEMOCRATIC PARTY	5. Office Soug House	ht		6. State & Dist	trict of Candidate 17				
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)									
Dr Lorenzen for Congress										
	(b) Address (number and street)									
	10400 Calaveras									
	(c) City, State, and ZIP Code									
	Waco				TX	76708				
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) Address (number and street)										
(c) City, State, and ZIP Code										
	·	mined this Stat	ement and to	o the best o	my knowledge a	and belief it is true, correct	t and comple	te.		
Signature of Candidate						Date				
Lorenzen, Mark, , ,						12/28/2023				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										

FEC FORM 2 (REV. 02/2009)