

Image# 202606219874229614

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Cleaver II, Emanuel, , ,			2. Candidate's FEC Identification Number H4MO05234	
(b) Address (number and street) 8217 E Gregory Blvd		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Kansas City		MO	64133-6325	3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate MO 05		

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) CLEAVER FOR CONGRESS		
(b) Address (number and street) P.O.Box 411872		
(c) City, State, and ZIP Code Kansas City MO 64141		

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) Clyburn Cleaver Figures Victory Fund		
(b) Address (number and street) 611 Pennsylvania Ave SE Ste 143		
(c) City, State, and ZIP Code Washington DC 20003-4303		

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 Cleaver II, Emanuel, , ,	Date 06/21/2026
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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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