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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)							
	Baccam, Lanon, , ,					1		
(b) Address (number and street) 541 44th St	☐ Check if address changed				Candidate's FEC Identification Number H4IA03172		
(c) City, State, and ZIP Code					3. Is This New Amen	ded	
	Des Moines		I/A	5031		Statement (N) OR (A)		
	Party Affiliation DEMOCRATIC PARTY	5. Office Soug House	ht		6. State & Dist	trict of Candidate 03		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
	2024							
	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
(:	a) Name of Committee (in full)							
	Baccam for Iowa							
(b) Address (number and street)							
	2813 Virginia Pl							
(c) City, State, and ZIP Code							
	Des Moines				IA	50321		
(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							
	I certify that I have exa	nmined this Stat	ement and to	the best of	my knowledge a	and belief it is true, correct and complete.		
Signature of Candidate					Date	-		
Baccam, Lanon, , ,					01/12/2025			
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)