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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Brooks, Bob, , ,		
(b) Address (number and street) PO Box 21212		☐ Check if address changed
(c) City, State, and ZIP Code Lehigh Valley PA 18002		2. Candidate's FEC Identification Number H6PA07188
4. Party Affiliation DEMOCRATIC PARTY		3. Is This Statement ☐ New (N) OR ☒ Amended (A)
5. Office Sought House		6. State & District of Candidate PA 07

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) BOB BROOKS FOR CONGRESS		
(b) Address (number and street) PO BOX 21212		
(c) City, State, and ZIP Code LEHIGH VALLEY PA 18002		

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) DEM RISING 2026		
(b) Address (number and street) 600 PENNSYLVANIA AVE SE #15180		
(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 Brooks, Bob, , ,	Date 07/08/2026
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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)

THE DEMOCRATIC BENCH FUND

(b) Address (number and street)

PO BOX 15845

(c) City, State, and ZIP Code

WASHINGTON

DC

20003

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)

BOB BROOKS VICTORY FUND

(b) Address (number and street)

PO BOX 21212

(c) City, State, and ZIP Code

LEHIGH VALLEY

PA

18002

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

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