Image# 202205059502587724 PAGE 1 / 3

## FEC FORM 2

## STATEMENT OF CANDIDACY

|   | /  | (0 111                    | (' ( II)      |                            |  |                 |  |                |                        |            |         |             |
|---|--|---------------------------|---------------|----------------------------|--|-----------------|--|----------------|------------------------|------------|---------|-------------|
| 1. (  |  | of Candidate              |               |                            |  |                 |  |                |                        |            |         |             |
|   |  | Porter, Katherine, , ,    |               |                            | 2. Candidate's FEC Identification Number |                 |  |                |                        |            |         |             |
| (b) Address (number and street)<br>PO Box 5176  |  |                           |               | ☐ Check if address changed |  |                 | 2. Candidate's FEC Identification Number H8CA45130 |                |                        |            |         |             |
| (   | (c) City, S  | tate, and ZIP             | Code          |                            |  |                 |  | 3. Is This     |                        | W          |         | Amended     |
|   | Irvine   |                           |               |                            | CA                                       | 9261            | 7  | Staten         |                        |            | 3       | <b>(</b> A) |
| 4.  | Party Affil  | iation                    |               | 5. Office Soug             | jht                                      |                 | 6. State & Dis                                     | trict of Candi | date                   |            |         |             |
|   | DEMOC  | RATIC PART                | Υ             | House                      |  |                 | CA   | 47             |                        |            |         |             |
|   | DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE  |                           |               |                            |  |                 |  |                |                        |            |         |             |
| 7. I  | l hereby o   | designate the f           | ollowing nar  | ned political co           | mmittee as m                             | ny Principal (  | Campaign Comi                                      | mittee for the | 2022<br>(year of elect |            | tion(s) |             |
| -   | NOTE: Th   | nis designatior           | should be f   | iled with the ap           | propriate offi                           | ce listed in th | ne instructions.                                   |                |                        |            |         |             |
| (   | (a) Name   | of Committee              | (in full)     |                            |  |                 |  |                |                        |            |         |             |
|   | Kat  | ie Porter                 | for Con       | gress                      |  |                 |  |                |                        |            |         |             |
|   | /l- \  | (                         | -l -tt)       |                            |  |                 |  |                |                        |            |         |             |
| (   | ` '  | ss (number ar<br>Box 5176 | ia street)    |                            |  |                 |  |                |                        |            |         |             |
|   | (c) City S   | tate, and ZIP             | Code          |                            |  |                 |  |                |                        |            |         |             |
| ,   |  |                           | oodo          |                            |  |                 | CA   | 92617          | 7                      |            |         |             |
|   | Irvir  | ie                        |               |                            |  |                 | CA   | 92017          |                        |            |         |             |
|   |  |                           |               |                            |  |                 |  |                |                        |            |         |             |
|   |  |                           | DE            | SIGNATIO                   | N OF OT                                  | HER AU          | <b>THORIZED</b>                                    | COMMIT         | TEES                   |            |         |             |
|   |  |                           |               | (                          | Including Joir                           | t Fundraisin    | g Representativ                                    | /es)           |                        |            |         |             |
| 8. 1  | l hereby a   | authorize the f           | ollowing nam  | ned committee              | which is NO                              | T my principa   | al campaign cor                                    | mmittee, to re | eceive and exp         | end fund   | s on h  | ehalf of my |
|   | candidac   |                           | o             |                            |  | , p             | ar carripangir co.                                 |                | oon o and one          | 0114 14114 | 0 0.1 2 |             |
|   | NOTE: Th   | nis designatior           | n should be f | iled with the pr           | incipal campa                            | ign committe    | ee.  |                |                        |            |         |             |
|   | (a) Name   | of Committee              | (in full)     |                            |  |                 |  |                |                        |            |         |             |
| ,   | ` '  |                           | ,             | es Victory                 | Fund                                     |                 |  |                |                        |            |         |             |
|   | Ou   |                           | arialaatt     | o violoty                  | i dila                                   |                 |  |                |                        |            |         |             |
|   |  | ss (number ar             |               |                            |  |                 |  |                |                        |            |         |             |
|   |  | S. Figueroa St            |               |                            |  |                 |  |                |                        |            |         |             |
|   | Ste. 4   | tate, and ZIP             | Codo          |                            |  |                 |  |                |                        |            |         |             |
| ,   |  |                           | Code          |                            |  |                 | 0.4  | 0004           |                        |            |         |             |
|   | LOS  | Angeles                   |               |                            |  |                 | CA   | 90017          |                        |            |         |             |
|   | I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. |                           |               |                            |  |                 |  |                |                        |            |         |             |
| Sia   | nature o   | f Candidato               |               |                            |  |                 |  | Date           |                        |            |         |             |
| Signature of Candidate  Porter, Katherine, , ,  |  |                           |               |                            |  |                 |  |                |                        |            |         |             |
| 101   | ier, Kum   | erine, , ,                |               |                            |  | [Elect          | ronically Filed]                                   | 05/05/20       | 22                     |            |         |             |
|   |  |                           |               |                            |  |                 |  |                |                        |            |         |             |
| 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)

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

| Page | <sup>2</sup> of | 3 |  |
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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

| 3. | hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee. |    |       |         |  |  |  |  |
|----|--|----|-------|---------|--|--|--|--|
|    | (a) Name of Committee (in full)  Lofgren Victory Fund  |    |       |         |  |  |  |  |
|    |  |    |       |         |  |  |  |  |
|    | (b) Address (number and street) c/o Contribution Solutions LLC 1346 The Alameda #7-380   |    |       |         |  |  |  |  |
|    | (c) City, State, and ZIP Code  |    |       |         |  |  |  |  |
|    | San Jose   | CA | 95126 |         |  |  |  |  |
| 3. | I hereby authorize the following named committee, which is NOT my principal candidacy. <b>NOTE</b> : This designation should be filed with the principal can   |    | •     | my      |  |  |  |  |
|    | (a) Name of Committee (in full)  |    |       |         |  |  |  |  |
|    | Takano California Wave   |    |       |         |  |  |  |  |
|    | (b) Address (number and street)<br>PO Box 15320  |    |       |         |  |  |  |  |
|    | (c) City, State, and ZIP Code  |    |       |         |  |  |  |  |
|    | Washington   | DC | 20003 |         |  |  |  |  |
| 3. | I hereby authorize the following named committee, which is NOT my princandidacy. NOTE: This designation should be filed with the principal care (a) Name of Committee (in full)  |    | •     | my<br>— |  |  |  |  |
|    | Katie Porter Victory Fund  |    |       |         |  |  |  |  |
|    | (b) Address (number and street)<br>611 Pennsylvania Ave SE   |    |       |         |  |  |  |  |
|    | Ste 143  |    |       |         |  |  |  |  |
|    | (c) City, State, and ZIP Code  |    |       |         |  |  |  |  |
|    | Washington   | DC | 20003 |         |  |  |  |  |
| 3. | I hereby authorize the following named committee, which is NOT my prin candidacy. NOTE: This designation should be filed with the principal car (a) Name of Committee (in full)  Nadler Victory Fund                                       |    |       | my<br>— |  |  |  |  |
|    | (b) Address (number and street)<br>200 W 79th St   |    |       |         |  |  |  |  |
|    | #8N  |    |       |         |  |  |  |  |
|    | (c) City, State, and ZIP Code  |    |       |         |  |  |  |  |
|    | New York   | NY | 10024 |         |  |  |  |  |

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

| Page | <sup>3</sup> of | 3 |
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| raye | O I             |   |

**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 candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee. |  |   |   |  |
|---|--|---|---|--|
|   | (a) Name of Committee (in full)  |   |   |  |
|   | Democracy Defenders  |   |   |  |
|   | (b) Address (number and street)<br>600 Pennsylvania Ave SE #15180  |   |   |  |
|   | (c) City, State, and ZIP Code  |   |   |  |
|   | Washington DC  |   | 20003   |  |
| 8.  | 8. I hereby authorize the following named committee, which is NOT my principal cam candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign co                                      | - | mittee, to receive and expend funds on behalf of my |  |
|   | (a) Name of Committee (in full)  |   |   |  |
|   | Neguse Porter Victory Fund   |   |   |  |
|   | (b) Address (number and street)<br>611 Pennsylvania Ave SE   |   |   |  |
|   | Suite 143  |   |   |  |
|   | (c) City, State, and ZIP Code  |   | 20003   |  |
|   | Washington DC  |   | 20003   |  |
| 8.  | 8. I hereby authorize the following named committee, which is NOT my principal camcandidacy. <b>NOTE</b> : This designation should be filed with the principal campaign compared (a) Name of Committee (in full) | - | mittee, to receive and expend funds on behalf of my |  |
|   | (b) Address (number and street)  |   |   |  |
|   | (c) City, State, and ZIP Code  |   |   |  |
| 8.  | 8. I hereby authorize the following named committee, which is NOT my principal cam candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign co                                      | - | mittee, to receive and expend funds on behalf of my |  |
|   | (a) Name of Committee (in full)  |   |   |  |
|   | (b) Address (number and street)  |   |   |  |
|   | (c) City, State, and ZIP Code  |   |   |  |