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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	Goodlander, Maggie, , ,		ali if a alaba		ما		O Condida	ta'a FFC Ida	tification N	l	
	(b) Address (number and street) 131 Daniel Webster Hwy #949	y ,				Candidate's FEC Identification Number H4NH02399					
	(c) City, State, and ZIP Code		NII	. 020	NCO		3. Is This			×	Amended
	Nashua Party Affiliation	5. Office Sought	NF	1 030		State & Diet	Staten rict of Candid	,) OR		(A)
4.	DEMOCRATIC PARTY	House			0.	NH	02	aale			
	DI	ESIGNATION	OF PR	INCIPA	L CA	AMPAIGI	N COMMI	TTEE			
7.	I hereby designate the following na	med political com	mittee as m	ıy Principa	l Cam	ıpaign Comr	mittee for the	2026 (year of elec		on(s).	
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)										
	Maggie for Congress										
	(b) Address (number and street)										
	131 Daniel Webster Hwy										
	#949 (c) City, State, and ZIP Code										
	Nashua					NH	03060	1			
	Nasilua					1411	00000	,			
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)										
	Goodlander Victory	/ Fund									
	(b) Address (number and street) 600 Pennsylvania Ave SE										
	Unit 15180										
	(c) City, State, and ZIP Code					DO.	00000				
	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				Date							
G	ioodlander, Maggie, , ,						08/08/20	25			
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

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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)								
	Service First Women's Victory Fund								
	(b) Address (number and street)								
	253 Blackthorn Dr								
	(c) City, State, and ZIP Code								
	Nicholasville	KY	40356						
8.	I hereby authorize the following named committee, which is NOT my prince candidacy. NOTE : This designation should be filed with the principal care								
	(a) Name of Committee (in full)								
	Serve America Victory Fund								
	(b) Address (number and street) PO Box 2013								
	(c) City, State, and ZIP Code								
	Salem	MA	01970						
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal candidacy. Name of Committee (in full) Majority Fund								
	(b) Address (number and street) 611 Pennsylvania Ave SE								
	Ste 143								
	(c) City, State, and ZIP Code								
	20003	DC	20003						
8.		y authorize the following named committee, which is NOT my principal campaign committee, to receive and expend fundacy. NOTE : This designation should be filed with the principal campaign committee.							
	Democracy Summer 2026								
	(b) Address (number and street) 600 Pennsylvania Ave SE								
	Unit 15180 (c) City, State, and ZIP Code								
	Washington	DC	20003						