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## FEC FORM 2

## STATEMENT OF CANDIDACY

	e of Candidate (in full)										
	o, Rashida, , , ess (number and street)	□С	heck if addre	ss changed		2. Candidate's FEC Identification Number					
	PO Box 32777					H8MI13250					
(c) City, Det	State, and ZIP Code roit		M	4823	2	3. Is This Statement (N) OR (A) Amended					
4. Party Aff		5. Office Soug	ht			strict of Candidate					
DEMO	CRATIC PARTY	House			MI	12					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election)											
NOTE: This designation should be filed with the appropriate office listed in the instructions.											
(a) Nam	(a) Name of Committee (in full)										
Rashida Tlaib for Congress											
(b) Addr	ess (number and street)										
РО	Box 32777										
(c) City,	State, and ZIP Code										
De	etroit				MI	48232					
candidad	-				, -	ommittee, to receive and expend funds on behalf of my					
	ne Empowermer	nt Fund									
(b) Addr	ess (number and street)										
РО	Box 1863										
(c) City,	State, and ZIP Code										
Indi	ianapolis				IN	46206					
	I certify that I have e	examined this Stat	ement and to	the best of	my knowledge	and belief it is true, correct and complete.					
Signature	of Candidate					Date					
Tlaib, Rash						08/21/2025					
,											
NOTE: Sub	mission of false, erroneo	us, or incomplete	information n	nay subject t	ne person sign	ing 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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Page	<sup>2</sup> of	_	

## **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

8.	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)					
	The Squad Victory Fund					
	(b) Address (number and street)					
	611 Pennsylvania Ave SE Num 143					
	(c) City, State, and ZIP Code					
	Washington	DC	20003			
8.	I hereby authorize the following named committee, which is N candidacy. <b>NOTE</b> : This designation should be filed with the p			behalf of my		
	(a) Name of Committee (in full)					
	Rustbelt Rosebuds					
	(b) Address (number and street)					
	611 Pennsylvania Avenue SE					
	Suite 143 (c) City, State, and ZIP Code					
	Washington	DC	20003			
8.	I hereby authorize the following named committee, which is N candidacy. <b>NOTE</b> : This designation should be filed with the p  (a) Name of Committee (in full)			behalf of my		
	Rooted in Movement					
	(b) Address (number and street)					
	,					
	611 Pennsylvania Avenue SE					
	611 Pennsylvania Avenue SE Suite 143					
	611 Pennsylvania Avenue SE	DC	20003			
	611 Pennsylvania Avenue SE Suite 143 (c) City, State, and ZIP Code	DC	20003			
8.	611 Pennsylvania Avenue SE Suite 143 (c) City, State, and ZIP Code	OT my principal campaign o	committee, to receive and expend funds on	behalf of my		
8.	611 Pennsylvania Avenue SE  Suite 143 (c) City, State, and ZIP Code  Washington  I hereby authorize the following named committee, which is N candidacy. NOTE: This designation should be filed with the p  (a) Name of Committee (in full)	OT my principal campaign o	committee, to receive and expend funds on	behalf of my		
8.	611 Pennsylvania Avenue SE Suite 143 (c) City, State, and ZIP Code Washington  I hereby authorize the following named committee, which is N candidacy. NOTE: This designation should be filed with the p  (a) Name of Committee (in full)  Rooted With The People	OT my principal campaign o	committee, to receive and expend funds on	behalf of my		
8.	611 Pennsylvania Avenue SE  Suite 143 (c) City, State, and ZIP Code  Washington  I hereby authorize the following named committee, which is N candidacy. NOTE: This designation should be filed with the p  (a) Name of Committee (in full)	OT my principal campaign o	committee, to receive and expend funds on	behalf of my		
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