

Image# 202510159790993815

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Golden, Jared, , ,		
(b) Address (number and street) PO Box 7108		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Lewiston ME 04240		2. Candidate's FEC Identification Number H8ME02185
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought House
6. State & District of Candidate ME 02		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)

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) Committee to Elect Jared Golden		
(b) Address (number and street) PO Box 7108		
(c) City, State, and ZIP Code Lewiston ME 04240		

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) Jared Golden Victory Fund 2026		
(b) Address (number and street) PO Box 7108		
(c) City, State, and ZIP Code Lewiston ME 04240		

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 Golden, Jared, , ,	Date 10/15/2025
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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 Committees

FEC Form 2S (Revised 02/2017)

Page 2 of 3DESIGNATION 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)

Democracy Summer 2026

(b) Address (number and street)

600 Pennsylvania Ave SE #15180

(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)

Frontline Protection Fund

(b) Address (number and street)

PO Box 65322

(c) City, State, and ZIP Code

Washington

DC

20035

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)

Blue Dog Victory Fund

(b) Address (number and street)

1030 15th St NW

Num 404

(c) City, State, and ZIP Code

Washington

DC

20005

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)

Jeffries Battleground Protection Fund

(b) Address (number and street)

430 South Capitol St SE

2nd Floor

(c) City, State, and ZIP Code

Washington

DC

20003

Optional Supplemental Page for Designation
of Additional Authorized CommitteesPage 3 of 3

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)

Majority Fund

(b) Address (number and street)

611 Pennsylvania Ave SE
Suite 143

(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)

(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

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