

Image# 202411229720017895

PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Jacobs, Sara, , ,		
(b) Address (number and street) P.O. Box 120085		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code San Diego CA 92112		2. Candidate's FEC Identification Number H8CA49074
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought House
6. State & District of Candidate CA 51		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) SARA JACOBS FOR CONGRESS		
(b) Address (number and street) PO BOX 120085		
(c) City, State, and ZIP Code SAN DIEGO CA 92112		

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) SARA JACOBS HOUSE VICTORY FUND		
(b) Address (number and street) 122 C STREET NW SUITE 360		
(c) City, State, and ZIP Code WASHINGTON DC 20001		

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 Jacobs, Sara, , ,	Date 11/22/2024
---	--------------------

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--