

Image# 202408069666088899

# FEC FORM 2

## STATEMENT OF CANDIDACY

|  |                                  |  |   |  |
|--|----------------------------------|--|---|--|
| 1. (a) Name of Candidate (in full)<br>Harris, Kamala, , , / Walz, Timothy, , , |                                  |  | 2. Candidate's FEC Identification Number<br>P80000722 |  |
| (b) Address (number and street)<br>PO Box 58174                                |                                  | <input type="checkbox"/> Check if address changed  |   |  |
| (c) City, State, and ZIP Code<br>Philadelphia PA 19102                         |                                  | 3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A) |   |  |
| 4. Party Affiliation<br>DEMOCRATIC PARTY                                       | 5. Office Sought<br>Presidential | 6. State & District of Candidate   |   |  |

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 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)<br>Harris for President |  |  |
| (b) Address (number and street)<br>PO Box 58174         |  |  |
| (c) City, State, and ZIP Code<br>Philadelphia PA 19102  |  |  |

### 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)<br>Harris Victory Fund         |  |  |
| (b) Address (number and street)<br>430 South Capitol Street SE |  |  |
| (c) City, State, and ZIP Code<br>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<br>Harris, Kamala, , , | Date<br>08/06/2024 |
|---|--------------------|

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

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

Optional Supplemental Page for Designation  
of Additional Authorized Committees

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)

Harris Action Fund

(b) Address (number and street)

430 South Capitol Street SE

(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)

Harris Baldwin Victory Fund

(b) Address (number and street)

PO Box 58174

(c) City, State, and ZIP Code

Philadelphia

PA

19102

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