

FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) HAKAMI, ARIANA, , ,		
(b) Address (number and street) PO BOX 435		☐ Check if address changed
(c) City, State, and ZIP Code REDONDO BEACH CA 90277		2. Candidate's FEC Identification Number H2CA36496
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House
6. State & District of Candidate CA 36		3. Is This Statement ☐ New (N) OR ☒ Amended (A)

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) ARIANA HAKAMI FOR CONGRESS		
(b) Address (number and street) PO BOX 435		
(c) City, State, and ZIP Code REDONDO BEACH CA 90277		

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)		
(b) Address (number and street)		
(c) City, State, and ZIP Code		

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 Hakami, Ariana, , ,	Date 01/12/2024
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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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