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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) SEIDEN, KATHY, W, ,		
(b) Address (number and street) 108 MARINGOUIN LN		☐ Check if address changed
(c) City, State, and ZIP Code MANDEVILLE LA 70471		2. Candidate's FEC Identification Number S6LA00573
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought Senate
6. State & District of Candidate LA 00		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 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) SEIDEN FOR SENATE		
(b) Address (number and street) 2133 SILVERSIDE DR STE K		
(c) City, State, and ZIP Code BATON ROUGE LA 70808		

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 SEIDEN, KATHY, , ,	Date 10/01/2025
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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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