

Image# 202601189794031996

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Walker, Trenita, Hillary, Ms,		
(b) Address (number and street) 4989 Taylor Ln		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Fort meade MD 20755		2. Candidate's FEC Identification Number P40006504
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought Presidential
		6. State & District of Candidate 00
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 2028 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) GROUND UP: BUILDING SOCIETY ONE LEVEL AT A TIME		
(b) Address (number and street) 129 WELLSRING DR		
(c) City, State, and ZIP Code SAINT CHARLES MO 63303		

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 Walker, Trenita, Hillary, Ms,	Date 01/18/2026
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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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