

**FEC FORM 2**  
**STATEMENT OF CANDIDACY**

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14 FEB -6 PM 4:21

1. (a) Name of Candidate (in full) <b>Joan Elizabeth Farr</b>		
(b) Address (number and street) <input type="checkbox"/> Check if address changed <b>P.O. Box 998</b>		2. Candidate's FEC Identification Number
(c) City, State, and ZIP Code <b>Broken Arrow, OK</b>		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation <b>IND</b>	5. Office Sought <b>US Senate</b>	6. State & District of Candidate <b>OK</b>

**DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE**

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 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) <b>Joan Farr for U.S. Senate</b>
(b) Address (number and street) <b>P.O. Box 998</b>
(c) City, State, and ZIP Code <b>Broken Arrow, OK 74013</b>

**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>N/A</b>
(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 <b>Joan E. Farr</b>	Date <b>Feb. 3, 2014</b>
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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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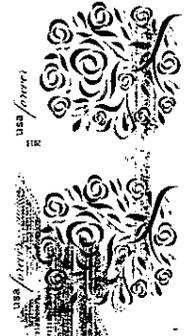
14020142004

14020142005

Joan Fair for U.S. Senate  
Box 998  
Broken Arrow, OK 74013

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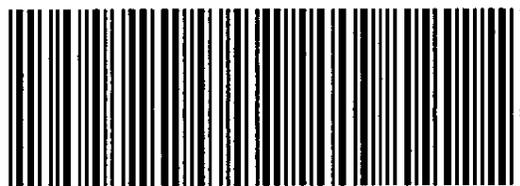
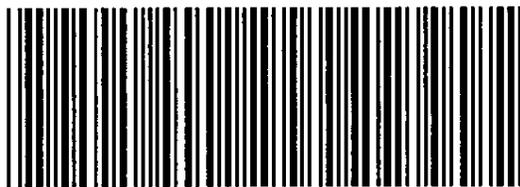
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