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FEC FORM 2

STATEMENT OF CANDIDACY

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FEC FORM 2 (REV. 02/2009)

1. (a) Name of Candidate (in full) SCLY DAVA MUIVANELL	FEC MAIL CENTER
(b) Address (number and street)	2. Candidate's FEC Identification Number
(c)-City, State, and ZIP Code San Marino, CA 91108	3. Is This New Amended Statement (N) OR (A)
4. Party Affiliation 5. Office Sought 6. State	& District of Candidate H - ,3 3
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE	
7. I hereby designate the following named political committee as my Principal Campaign	Committee for the 2014 election(s).
NOTE: This designation should be filed with the appropriate office listed in the instruc	G ,
(a) Name of Committee (in full)	
Barbara Mulvanci, li	Longress.
(b) Address (number and street)	0
2730 Devonoort Road	
(c) City, State, and ZIP Code	
CO City, State, and ZIP Code San Maino, Ga 91108	
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	
8. I hereby authorize the following named committee, which is NOT my principal campa candidacy.	ign committee, to receive and expend funds on behalf of my
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 know	ledge and belief it is true, correct and complete.
Signature of Candidate	Date
	0 51 001
	1 L rebow
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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BARBARA MULVANEY

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DATE PREPARED

(8/2013)