

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Lynn A. Westmoreland			2. Candidate's FEC Identification Number H4GA08067	
(b) Address (number and street) 25 Bretts Bend		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Sharpsburg GA 30277		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate GA 03		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) Westmoreland for Congress		
(b) Address (number and street) P.O. Box 458		
(c) City, State, and ZIP Code Sharpsburg GA 30277		

### 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) Westmoreland Victory Committee		
(b) Address (number and street) PO Box 1117		
(c) City, State, and ZIP Code Sharpsburg GA 30277		

*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 Lynn A. Westmoreland  <i>[Electronically Filed]</i>	Date 08/18/2015
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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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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

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)

**GEORGIA 2016**

(b) Address (number and street)

2470 DANIELS BRIDGE RD STE 121

(c) City, State and ZIP Code

ATHENS

GA

30606

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

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)

**GEORGIA VICTORY FUND**

(b) Address (number and street)

2470 DANIELS BRIDGE RD STE 121

(c) City, State and ZIP Code

ATHENS

GA

30606

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

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)

**Insuring Our Future**

(b) Address (number and street)

824 S Milledge Ave Ste 101

(c) City, State and ZIP Code

Athens

GA

30605