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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Zinke, Ryan, K, ,			2. Candidate's FEC Identification Number H4MT01041	
(b) Address (number and street) 409 2nd St W		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Whitefish MT 59937-3010		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 MT 01		

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) Zinke for Congress		
(b) Address (number and street) PO Box 1596		
(c) City, State, and ZIP Code Helena MT 59624		

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) Seal Pac		
(b) Address (number and street) One International Place 44th Floor		
(c) City, State, and ZIP Code Boston MA 02110-2602		

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 Zinke, Ryan, K, , <i>[Electronically Filed]</i>	Date 10/17/2016
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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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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

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)

Zinke Victory Fund

(b) Address (number and street)

2470 Daniells Bridge Rd #121

(c) City, State and ZIP Code

Athens

GA

30606-6191

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)

Zinke Daines Victory Fund 2016

(b) Address (number and street)

228 S Washington Street
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314

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)

(b) Address (number and street)

(c) City, State and ZIP Code