

11 OCT -4 AM 10:14

**FEC FORM 2
 STATEMENT OF CANDIDACY**

1. (a) Name of Candidate (in full) MIKE LEE			2. Identification Number SOUT00165	
(b) Address (number and street) 917 QUAIL HOLLOW CIRCLE		<input type="checkbox"/> Check if address changed		
(c) City, State and ZIP Code ALPINE UT 84004		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	6. State & District of Candidate UT 00		

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) FRIENDS OF MIKE LEE INC.		
(b) Address (number and street) 190 WEST 800 NORTH STE 100		
(c) City, State and ZIP Code PROVO UT 84601		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

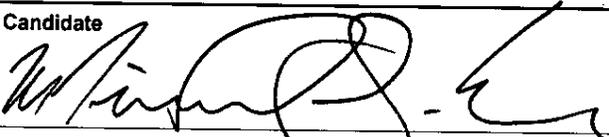
(Including Joint Fundraising Representatives)

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 MIKE LEE 	Date
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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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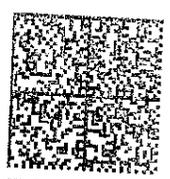
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GILBERT & STEWART, P.C.
CERTIFIED PUBLIC ACCOUNTANTS
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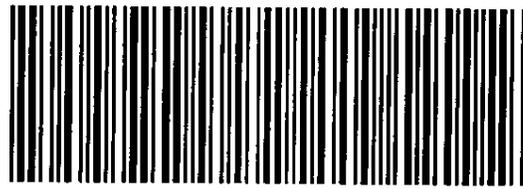
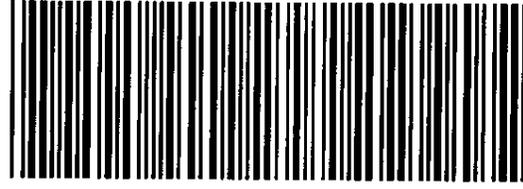
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