

FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Mary Bono Mack			2. Identification Number H8CA44034	
(b) Address (number and street) PO Box 3370		<input type="checkbox"/> Check if address changed		
(c) City, State and ZIP Code Palm Springs CA 92263-3370		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 CA 45		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 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) Mary Bono Mack Committee		
(b) Address (number and street) PO Box 3370		
(c) City, State and ZIP Code Palm Springs CA 92263-3370		

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) Mary Bono Mack Victory Fund		
(b) Address (number and street) 228 South Washington Street Suite 115		
(c) City, State and ZIP Code Alexandria VA 22314-5404		

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 Mary Bono Mack	Date 02/28/2011
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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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