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FEC FORM 2 STATEMENT OF CANDIDACY

FEC MAIL CENTER

								_		
1. (a) Nades of Candidate (in full) WILLIAM TAYLOR GRIF	FIN									
(b) Address (number and street)					2. Identification Number					
6113 Harborside Dr.					H4NC03059					
(c) City, State, and ZIP Code New Bern, NC 28560				3. Is Thi		Naw (N)	OR	N	Amended (A)	
4. Party Afrilation	5. Office Sought		6. State & Dist					<u> </u>	~~	
REP	HOUSE		NC-03					_		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 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)										
TAYLOR GRIFFIN	FOR CONGR	ESS								
(b) Address (number and street)										
P.O. BOX 3451										
(c) City, State, and ZIP Code									•	
NEW BERN, NC 2	1856:4									
DESIGNATION OF OTHER AUTHORIZED COMMITTEES										
	•		ig Representative							
 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) Nimne of Commillee (in full)										
(b) Address (munifer and street)										
									•	
(c) City, State, and ZIP Code										
to sult state our run same										
			سبيبتها فالتهادات							
I certify that I have examined this Statement and to the bast of my knowledge and belief it is true, correct and complete.										
Signature/of Candidate . Date							• •			
11/1/2					Oct. 28, 2013					
NOTE: Submission of felse, erronsous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. \$437g.										
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(8/2013)