

**FEC FORM 2
STATEMENT OF CANDIDACY**

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1. (a) Name of Candidate (in full) Michael D. Parrish		2. Identification Number
(b) Address (number and street) <input type="checkbox"/> Check if address changed PO Box 1722		
(c) City, State, and ZIP Code West Chester, PA 19380		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation DEM	5. Office Sought House	6. State & District of Candidate PA 6

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) Parrish for Congress
(b) Address (number and street) PO Box 1722
(c) City, State, and ZIP Code West Chester, PA 19380

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

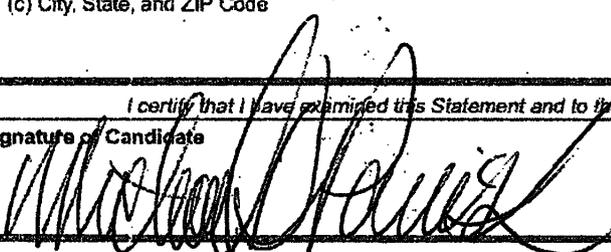
(Including Joint Fundraising Representatives)

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 	Date 12/30/2013
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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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Federal Election Commission
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12/31/13

PREPARER

DATE PREPARED

(8/2013)

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