

Image# 201510079002817703

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) <b>Mr. Stewart Mills</b>			2. Candidate's FEC Identification Number <b>H4MN08083</b>	
(b) Address (number and street) <b>PO Box 1039</b>		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code <b>Brainerd MN 56401</b>		3. Is This Statement <input type="checkbox"/> New (N) <b>OR</b> <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation <b>REPUBLICAN PARTY</b>	5. Office Sought <b>House</b>	6. State & District of Candidate <b>MN 08</b>		

### 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) <b>FRIENDS OF STEWART MILLS</b>		
(b) Address (number and street) <b>PO BOX 1039</b>		
(c) City, State, and ZIP Code <b>BRAINERD MN 56401</b>		

### 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>Minnesota Congressional Victory Fund</b>		
(b) Address (number and street) <b>2470 Daniells Bridge Road Suite 121</b>		
(c) City, State, and ZIP Code <b>Athens GA 30606</b>		

*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 <i>Mr. Stewart Mills</i>  <b>[Electronically Filed]</b>	Date <b>10/07/2015</b>
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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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**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)

Young Guns Day I 2014

(b) Address (number and street)

228 S Washington St #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)

Lakes Area Victory Fund

(b) Address (number and street)

2470 Daniells Br Rd Ste 121

(c) City, State and ZIP Code

Athens

GA

30606

**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