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## **FEC FORM 2**

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	Mark DeSaulnier							Lo Condidate FEO Idantific ti No. 1			
	(b) Address (number and street) Post Office Box 6066	☐ Check if address changed				Candidate's FEC Identification Number     H0CA10073					
	(c) City, State, and ZIP Code						New		nended		
	Concord	CA 94524					(N) OR	(A	)		
4.	Party Affiliation	5. Office Soug	ht			rict of Candidate					
	DEMOCRATIC PARTY	House			CA	11					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)										
Mark DeSaulnier for Congress											
	(b) Address (number and street) 5429 Madison Avenue										
	(c) City, State, and ZIP Code										
	Sacramento				CA	95841					
(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)											
DeSaulnier for Congress											
	(b) Address (number and street) 5429 Madison Avenue										
_	(c) City, State, and ZIP Code										
	Sacramento				CA	95841					
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.											
Si	gnature of Candidate					Date					
M	lark DeSaulnier			[Elec	tronically Filed]	01/17/2014					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											

FEC FORM 2 (REV. 02/2009)