LATHROP & GAGELLP

TERRY J. BRADY DIRECT LINE: 816.460.5635 EMAIL: TBRADY@LATHROPGAGE.COM

WWW.LATHROPGAGE.COM

KANSAS CITY, MISSOUND SATTRE 2200 AM 11: 21 PHONE: 816.292.2000

FAX: 816.292.2001

February 10, 2017

VIA HAND DELIVERY

Jessica Grainger Reports Analysis Division Federal Election Commission 999 E Street, N. W. Washington, D.C.20463

Re:

Statement of Candidacy Samuel B. "Sam" Graves Missouri, 6th District

FEC Identification Number H0MO06073

Dear Ms. Grainger:

We have for acknowledgment of your letter dated February 6, 2017.

For your file please find enclosed herewith a copy of FEC Form 2 Statement of Candidacy, hand delivered and filed with the FEC Mail Center.

Thank you for your assistance.

Very truly yours,

LATHROP & GAGE LLP

Terry J. Brady

TJB/kam

FEC FORM 2 (REV. 02/2009)

2017 - 03 - 01 - 03 - 00142970

HAND DELIVERED FEC FORM 2 STATEMENT OF CANDIDACY

RECEIVED FEC MAIL CENTER

(t	a) Name of Candidate (in full)				ZUITHAR - L AN II : 20
	Graves, Samuel, B., , Jr.		·		
(0	o) Address (number and street) 19181 State Highway O	€ Check if add	lress ch	anged	Candidate's FEC Identification Number H0MO06073
	c) City, State, and ZIP Code Tarkio		мо	64491-9209	3. Is This New Amend (N) OR (A)
4. P	arty Affiliation	5. Office Sought		6. State & Dis	strict of Candidate
F	REPUBLICAN PARTY	House		МО	06
7. 1	DE hereby designate the following nar	SIGNATION OF P			nmittee for the 2018 election(s).
N	IOTE: This designation should be	filed with the appropriate	office list	ed in the instructions.	(year of election)
(;	a) Name of Committee (in full)				
	Graves for Congres	S			
(1	b) Address (number and street) 2345 Grand Blvd Ste 2400				
(c) City, State, and ZIP Code				
	Kansas City			МО	64108-2642
					
	DE	SIGNATION OF C			
	hereby authorize the following nar	, -		draising Representat principal campaign co	ommittee, to receive and expend funds on behalf of n
	NOTE: This designation should be	filed with the principal can	npaign c	ommittee.	
(a) Name of Committee (in full)				
Ì	Sam Graves Victor	y Fund			,
(b) Address (number and street) 2345 Grand Blvd				
	Ste 2400				,
(c) City, State, and ZIP Code	•			
	Kansas City			МО	64108-2642
	· I certify that I have ex	amined this Statement an	d to the	best of my knowledge	and belief it is true, correct and complete.
Sia		amined this Statement an	d to the	best of my knowledge	
_	I certify that I have extended and the control of Candidate arves, Samuel, B., Jr.	amined this Statement an	d to the	best of my knowledge	pand belief it is true, correct and complete. Date 02/13/2017
_	nature of Candidate	amined this Statement an	d to the	best of my knowledge	Date
Gra	nature of Candidate aves, Samuel, B., , Jr.				Date

Hand Delivered

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	3/11/1
PREPARER (3/2015)	DATE PREPARED