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FEC FORM 2 STATEMENT OF CANDIDACY

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1	. (a) Name of Candidate (in full) Willita D. Bush							F	EC MAIL CE
_	(b) Address (number and street		Check if address	changed	(i)) 2	Identification	Number		
	3611 Marvin Ave				· ' '				
	(c) City, State, and ZIP Code Saint Louis				(((. Is This Statement	New (N)	OR	Amended (A)
4	. Party Affiliation Green Party	5. Office S	-		tate & District	of Candidate			
_		DESIGNA	TION OF PRIN	CIDAL CA	MDAIGN C	CAMMITT	C C		
) 7	7. I hereby designate the following					e for the	2016	election	on(s).
	NOTE: This designation should	be filed with th	ne appropriate office	listed in the ins	structions.	0-			•
	(a) Name of Committee (in full)								
	Willita D. Bush	for Pres	ident Explo	ratory C	ommitte	ee			
_	(b) Address (number and street)			•				
	3611 Marvin Av	/e							
_	(c) City, State, and ZIP Code								
									•
	Saint Louis, Mo	0 63114	•						
		-	TION OF OTHE	ER AUTHO	RIZED CO	OMMITTE	ES	· · · · · · · · · · · · · · · · · · ·	
		-				OMMITTE	ES		
. 8		DESIGNA	TION OF OTHE (Including Joint F	undraising Re	presentatives)			nd funds	on behalf of my
. 8	3. I hereby authorize the following	DESIGNA	TION OF OTHE (Including Joint F littee, which is NOT m	Fundraising Re	presentatives)			nd funds	on behalf of my
. 8	I hereby authorize the following candidacy.	DESIGNA	TION OF OTHE (Including Joint F littee, which is NOT m	Fundraising Re	presentatives)			nd funds	on behalf of my
8	I hereby authorize the following candidacy. NOTE: This designation should	DESIGNA named comm	TION OF OTHE (Including Joint F littee, which is NOT m	Fundraising Re	presentatives)			nd funds	on behalf of my
	3. I hereby authorize the following candidacy. NOTE: This designation should (a) Name of Committee (in full) (b) Address (number and street)	DESIGNA named comm	TION OF OTHE (Including Joint F littee, which is NOT m	Fundraising Re	presentatives)			nd funds	on behalf of my
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· —	3. I hereby authorize the following candidacy. NOTE: This designation should (a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code	DESIGNA named comm be filed with th	TION OF OTHE (Including Joint F ittee, which is NOT m ne principal campaign	Fundraising Re	presentatives) mpaign commi	ttee, to receiv	e and expen		
	3. I hereby authorize the following candidacy. NOTE: This designation should (a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code	DESIGNA named comm be filed with th	TION OF OTHE (Including Joint F ittee, which is NOT m ne principal campaign	Fundraising Re	presentatives) mpaign commi	belief it is true	e, correct an	nd compl	ete.
	3. I hereby authorize the following candidacy. NOTE: This designation should (a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code I certify that I have signature of Candidate	DESIGNA named comm be filed with the	TION OF OTHE (Including Joint F ittee, which is NOT m ne principal campaign s Statement and to th	Fundraising Render of the committee.	nowledge and	belief it is true	e, correct an	nd compl	ele.
	B. I hereby authorize the following candidacy. NOTE: This designation should (a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code I certify that I have Signature of Candidate	DESIGNA named comm be filed with the	TION OF OTHE (Including Joint F ittee, which is NOT m ne principal campaign s Statement and to th	Fundraising Render of the committee.	nowledge and	belief it is true	e, correct an	nd compl	ele.

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(8/2013)