

FEC FORM 2
STATEMENT OF CANDIDACY

file with the Secretary of the Senate

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1. (a) Name of Candidate (in full) <u>Marcia Roberta Thorne</u>		2. FEC Candidate Identification Number
(b) Address (number and street) <input type="checkbox"/> Check if address changed <u>5541 Arlington Rd #2</u>		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code <u>Jacksonville, FL 32211</u>		6. State & District of Candidate <u>FL 9</u>
4. Party Affiliation <u>REP</u>	5. Office Sought <u>U.S. Senate</u>	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) <u>Marcia R. Thorne for U.S. Senate</u>
(b) Address (number and street) <u>5541 Arlington Rd #2</u>
(c) City, State, and ZIP Code <u>Jacksonville, FL 32211</u>

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 <u>Marcia Thorne</u>	Date <u>6/21/2016</u>
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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FROM: Marcia Thorne
5541 Arlington Road #2
Jacksonville, FL 32211
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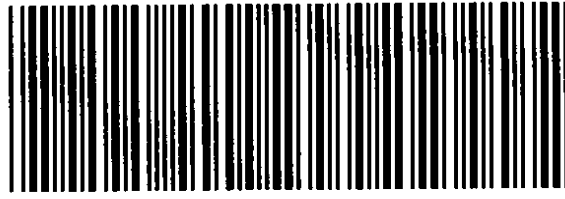
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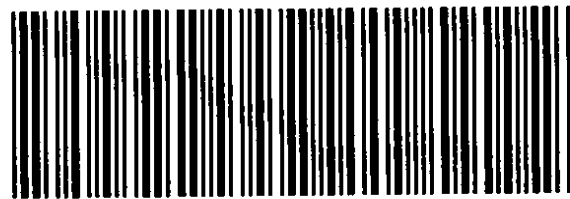
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