

COPY



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-5

March 28, 2014

PAUL W. DEBOW
440 FAIRGROUNDS RD LOT 38
NATCHITOCHEs, LA 71457

Response Due Date
05/02/2014

CANDIDATE ID NUMBER: P60005162

Dear Candidate:

This letter is prompted by the Commission's preliminary review of your Statement of Candidacy (FEC Form 2), received 2/20/14. This notice requests information essential to full public disclosure of your federal election campaign finances. Additional information is needed for the following 3 item(s):

1. The year of election was not provided. Please provide an amended FEC Form 2 that includes the year of election.
2. The name and address of your Principal Campaign Committee (PCC) was not provided. Please provide an amended FEC Form 2 with the name and address of your PCC.
3. Your FEC Form 2 was not signed. Please provide an amended FEC Form 2 that includes your original signature.

An adequate response must be received by the Commission on or before the due date noted above. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. **Requests for extensions of time in which to respond will not be considered.**

The FEC Form 2 can be downloaded from the FEC website at <http://www.fec.gov>, or requested through the FEC Faxline at (202) 501-3413. (11 CFR § 101.1(a)) Please note that electronic filers must file amendments (to include statements, designations, and reports) in an electronic format and must submit an amended report in its entirety.

If you have any further questions, please contact Christopher Whyrick in the Reports Analysis Division on the toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division). His local number is (202) 694-1161.

14031231991 /

DEBOW, PAUL W MR

Page 2 of 2

Sincerely,

A handwritten signature in black ink, appearing to read "Nataliya Ioffe". The signature is written in a cursive style with some stylized flourishes.

Nataliya Ioffe
Chief, Authorized Branch
Reports Analysis Division

481

14031231992

For help completing Form 2, please double-click the

icon next to each line number

RECEIVED

COPY 2014 APR 29 AM 11:47
FEC MAIL CENTER

FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) PAUL Wesley De Bow Paul Wesley De Bow		2. Identification Number P60005162
(b) Address (number and street) <input type="checkbox"/> Check if address changed 440 FAIRGROUND RD 60538		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code NATCHITOCHEES L.A.		
4. Party Affiliation REPUBLICAN	5. Office Sought PRESIDENT	6. State & District of Candidate L.A. 2ND

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) Committee of ONE
(b) Address (number and street) NATCHITOCHEES LA 71597
(c) City, State, and ZIP Code

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) AT THIS TIME FROM THE
(b) Address (number and street) AUTHORIZED COMMITTEE PRESENTLY A COMMITTEE OF ONE
(c) City, State, and ZIP Code SAME AS ABOVE AND PAYING MY OWN WAY AT THIS TIME

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 Paul De Bow	Date 4/15/2014
--	--------------------------

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. 12/2008)

To print and file this form, select "Print" from the "File" menu above. In the "Print" window, select "Document" from the drop down menu labeled "Comments and Forms" Doing so will ensure that the icons and other instructions will not appear on your filing. Click here for a video printing demonstration.

14031231993

RECEIVED
 PRESS FIRMLY TO SEAL
 APR 29 AM 11:47
 FCC MAIL CENTER



PRIORITY MAIL EXPRESS
 U.S. POSTAGE PAID
 NATCHITOCHEES, LA
 71457
 APR 28, 14
 AMOUNT
\$22.69
 000-456-47-12

1007



EG 905617443 US



Mailing Label
 Label # 8, March 2004

Post Office To Addressee

14031231994
 PRESS HARD. YOU ARE MAKING 3 COPIES.

ORIGIN (POSTAL SERVICE USE ONLY)			
PO ZIP Code 71457	Day of Delivery <input checked="" type="checkbox"/> Next <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd	Postage \$ 19.99	
Date Accepted 4/28/14	Scheduled Date of Delivery 4/30	Return Receipt Fee \$ 2.70	
Mo. Day Year 4 28 14	Scheduled Time of Delivery <input type="checkbox"/> Noon <input checked="" type="checkbox"/> 3 PM	COD Fee \$	Insurance Fee \$
Time Accepted 10:33 PM	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Total Postage & Fees \$ 22.69	
Flat Rate <input checked="" type="checkbox"/> or Weight	Int'l Alpha Country Code	Acceptance Emp. Initials [Signature]	
lbs.	ozs.		

DELIVERY (POSTAL USE ONLY)		
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Date	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	

CUSTOMER USE ONLY	
PAYMENT BY ACCOUNT Express Mail Corporate Acct. No.	<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Mail Only) Additional merchandise insurance is void if customer requests waiver of signature. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and authorize that delivery employee's signature constitutes valid proof of delivery.
Federal Agency Acct. No. or Postal Service Acct. No.	
<input type="checkbox"/> NO DELIVERY	<input type="checkbox"/> Mailer Signature

FROM: (PLEASE PRINT) PHONE ()
Paul De Bow
440 Fairground # 38
Natchitoches La 71457

TO: (PLEASE PRINT) PHONE ()
Federal Election Comm,
Washington, DC

FOR PICKUP OR TRACKING
 Visit www.usps.com
 Call 1-800-222-1811

ZIP + 4 (U.S. ADDRESSES ONLY. DO NOT USE FOR FOREIGN POSTAL CODES.)
20463+
 FOR INTERNATIONAL DESTINATIONS, WRITE COUNTRY NAME BELOW.

This packaging is the property of the U.S. Postal Service® and is provided solely for use in sending Priority Mail Express™ shipments. Misuse may

S.F.E.

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

5681521501174031231995

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input checked="" type="checkbox"/> USPS Priority Mail Express	Postmarked <i>4/28/2014</i>
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery	<input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>Jh</i> PREPARER (8/2013)	<i>4/28/2014</i> DATE PREPARED