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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	John Timothy Griffin (b) Address (number and street)	☐ Check if address changed				2. Candidate's FEC Identification Number			
	P.O. Box 7526				H0AR02107				
	(c) City, State, and ZIP Code				_		New	X	Amended
_	Little Rock	F 055 0	AF	7221			(N) OR		(A)
4.	Party Affiliation REPUBLICAN PARTY	5. Office Soug House	ht		6. State & Dist	rict of Candidate 02			
	REI OBEIOAIT ARTT	110000			741				
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) Re-Elect Tim Griffin For Congress Committee									
	(b) Address (number and street) P.O. Box 7526								
	(c) City, State, and ZIP Code								
	Little Rock				AR	72217			
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.									
	gnature of Candidate					Date			
Je	hn Timothy Griffin			[Elec	tronically Filed]	05/21/2013			
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)