

FEC FORM 2

STATEMENT OF CANDIDACY

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2019 FEB 22 PM 12:22

1. (a) Name of Candidate (in full) Bob Carr		
(b) Address (number and street) <input type="checkbox"/> Check if address changed 6635 Wendell		2. FEC Candidate Identification Number c- 00655217
(c) City, State, and ZIP Code Mackinac Island, Michigan 49757		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation Republican	5. Office Sought United States Senator	6. State & District of Candidate Michigan

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) Elect Bob Carr U S Senate Committee
(b) Address (number and street) P. O. Box 4442
(c) City, State, and ZIP Code Traverse City, Michigan 49685

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 Bob Carr	Date 02/14/2019
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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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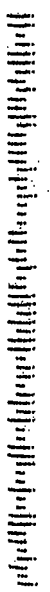
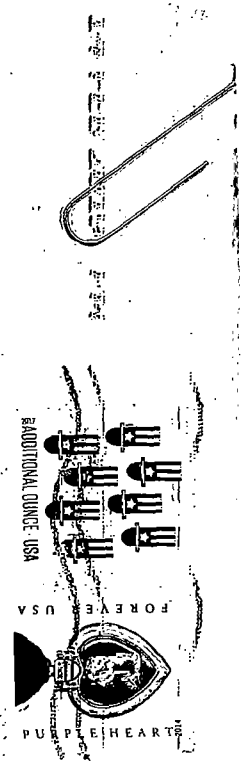
Elect Bob U.S. Senator - Committee
P.O. Box 4442
Traverse City, MI 49685

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Federal Election Commission
1050 First St, N.E.
Washington, D.C.
20463

Attn: Michael Doby



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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.

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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

mf
 PREPARER
 (3/2015)

2-22-19
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