

# STATEMENT OF CANDIDACY

(see reverse side for instructions)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

OCT 6 12 39 PM '97

|  |                                   |  |                          |
|--|-----------------------------------|--|--------------------------|
| 1. (a) Name of Candidate (in full)<br>Robert D. Greenlee   |                                   |  | 2. Identification Number |
| (b) Address (number and street) <input type="checkbox"/> Check if address changed<br>P.O. Box 4298, 2076 Hardscrable Drive |                                   |  |                          |
| (c) City, State, and ZIP Code<br>Boulder, Colorado 80306-4298  |                                   |  |                          |
| 3. Party Affiliation<br>Republican   | 4. Office Sought<br>Congressional | 5. State & District of Candidate<br>Colorado, District 2 |                          |

## DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby authorize the following named political committee as my Principal Campaign Committee for the 1998 election(s).  
(year of election)

NOTE: This designation should be filed with the appropriate office listed below.

|  |
|--|
| (a) Name of Committee (in full)<br>Greenlee for Congress Exploratory Committee |
| (b) Address (number and street)<br>P.O. Box 4298, 2076 Hardscrable Drive       |
| (c) City, State, and ZIP Code<br>Boulder, Colorado 80306-4298                  |

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(including Joint Fundraising Representatives)

7. 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<br> | Date<br>9-30-97 |
|---|-----------------|

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. 5437g.

### CANDIDATES FOR THE OFFICE OF:

U.S. Senate mail to:  
Secretary of the Senate  
Office of Public Records  
232 Hart Senate Office Bldg.  
Washington, DC 20510-7116

All other candidates  
mail to:  
Federal Election Commission  
999 E Street, N.W.  
Washington, DC 20463

For further information contact:  
Federal Election Commission  
Toll-free 800/424-9530  
Local 202/219-3420

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

FEC FORM 2

(revised 4/87)

