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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	ROBINSON, ART, , Dr., (b) Address (number and street)										
	2251 DICK GEORGE ROAD						Candidate's FEC Identification Number H0OR04081				
	(c) City, State, and ZIP Code					3. Is This	Ne			Amended	
	CAVE JUNCTION	OR 97523				Stateme	, ,	OR OR	Ш	(A)	
4.	Party Affiliation	5. Office Soug	ht			rict of Candida	te				
	Rep	House			OR	04					
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) ART ROBINSON FOR CONGRESS											
	(b) Address (number and street) 2251 DICK GEORGE RD										
	(c) City, State, and ZIP Code										
	CAVE JUNCTION				OR	97523					
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)											
ART ROBINSON FOR CONGRESS											
	(b) Address (number and street) 2251 DICK GEORGE RD										
	(c) City, State, and ZIP Code										
	CAVE JUNCTION				OR	97523					
_											
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.											
Si	gnature of Candidate					Date					
R	OBINSON, ART, , Dr.,			[Eleci	ronically Filed]	01/31/2020)				
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)