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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) JOHN ROBERT MITCHEL		
(b) Address (number and street) 3955 MAPLE GROVE LANE	☐ Check if address changed	
2. Candidate's FEC Identification Number		
(c) City, State, and ZIP Code BEAVERCREEK OH 45440	3. Is This Statement ☒ New (N) OR ☐ Amended (A)	
4. Party Affiliation REPUBLICAN	5. Office Sought REPRESENTATIVE	6. State & District of Candidate OHIO, DISTRICT 7

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the **2010** 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) AMERICANS FOR JOHN MITCHEL 2010
(b) Address (number and street) 3955 MAPLE GROVE LN.
(c) City, State, and ZIP Code BEAVERCREEK, OH 45440

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

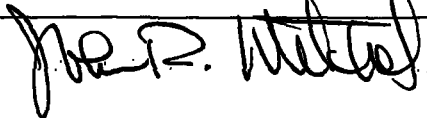
(Including Joint Fundraising Representatives)

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 	Date 2/9/2010
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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Federal Election Commission
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EP
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