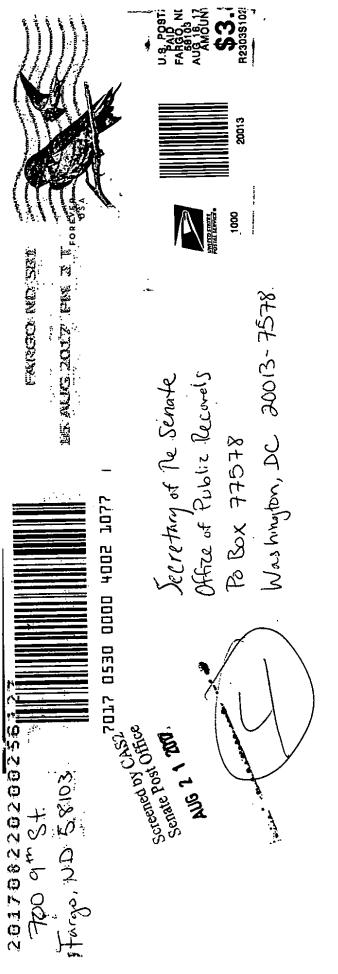
## FEC FORM 2 STATEMENT OF CANDIDACY

STREATHER OF THE SENATE

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1. (a) Name of Candidate (in full) Caripbell, Tom,  (b) Address (number and street) 15:35 County Rd 11  (c) City, State, and ZIP Code Grafton 1. Party Affiliation REPUBLICAN PARTY  DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE 7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)  NOTE: This designation should be filed with the appropriate office listed in the Instructions.  (a) Name of Committee (in full) Tom Campbell for North Dakota  (b) Address (number and street)  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 be candidacy.  NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds on be candidacy.  NOTE: This designation should be filed with the principal campaign committee.  (a) Name of Committee (in full)  DESIGNATION OF OTHER AUTHORIZED committee, to receive and expend funds on be candidacy.  NOTE: This designation should be filed with the principal campaign committee.	Campbell, Tom, , ,											
(c) City, State, and ZIP Code Gratton  Party Affiliation Party Affiliation REPUBLICAN PARTY  DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE  I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)  NOTE: This designation should be filed with the appropriate office listed in the instructions.  (a) Name of Committee (in full) Tom Campbell for North Dakota  DESIGNATION OF OTHER AUTHORIZED COMMITTEES  (Including Joint Fundraising Representatives)  I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on be candidacy.  NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds on be candidacy.  NOTE: This designation should be filed with the principal campaign committee.  (a) Name of Committee (in full)	Address (number and street)				_							
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(b) Address (number and street)	i) Name of Committee (in full)											
	) Address (number and street)		<u> </u>	·								
(a) City Class and ZID Code	a) City State and 7ID Code					<u> </u>						
(c) City, State, and ZIP Code	) 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.	I certify that I have examined this Sta	itement and to the	best of my l	nowledge	and belief it is true	e, <i>com</i>	ect and	i compl	ete.			
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HART SENATE OFFICE BUILDING SUITE 232

## United States Senate

OFFICE OF THE SECRETARY

WASHINGTION, DC 20510-7116 PHONE(202) 224-0322

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