

**FEC FORM 2  
STATEMENT OF CANDIDACY**

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2017 JUL 17 AM 8:26

1. (a) Name of Candidate (in full) David Owen McKeon		2. Identification Number
(b) Address (number and street) <input type="checkbox"/> Check if address changed 10170 W Tropicana Ave #156-412		
(c) City, State, and ZIP Code Las Vegas, NV 89147		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation REP	5. Office Sought HOUSE	6. State & District of Candidate NV03

**DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE**

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) McKeon For Nevada
(b) Address (number and street) 10170 W Tropicana Ave #156-412
(c) City, State, and ZIP Code Las Vegas, NV 89147

**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 July 10, 2018
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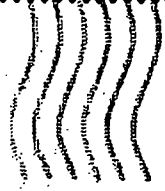
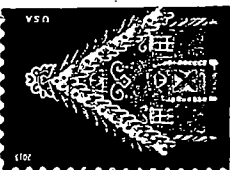
**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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2017-07-17 08:26 AM

NON AFFRANCARE

MCKEON  
10170 W. Tropicana Ave  
#156-412  
Las Vegas, NV  
89147

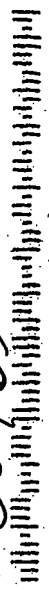


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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

  
 PREPARER

7/17/17  
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2017-07-17 09:00:00 AM