

**FEC FORM 2**  
**STATEMENT OF CANDIDACY**

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|                                                                                                                     |                                               |                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| 1. (a) Name of Candidate (in full)<br><b>Jeffrey MARLIN Phillips</b>                                                |                                               | 2. Candidate's FEC Identification Number                                                                        |
| (b) Address (number and street) <input type="checkbox"/> Check if address changed<br><b>6108 Mountain Brook Rd.</b> |                                               |                                                                                                                 |
| (c) City, State, and ZIP Code<br><b>Greensboro, NC 27455</b>                                                        |                                               | 3. Is This Statement <input checked="" type="checkbox"/> <b>New (N)</b> OR <input type="checkbox"/> Amended (A) |
| 4. Party Affiliation<br><b>Republican</b>                                                                           | 5. Office Sought<br><b>U.S. House of Rep.</b> | 6. State & District of Candidate<br><b>NC 6th District</b>                                                      |

**DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE**

7. I hereby designate the following named political committee as my Principal Campaign Committee for the **2014** 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)<br><b>Committee to Elect Jeff Phillips</b> |
| (b) Address (number and street)<br><b>5109 W Wendover Ave</b>              |
| (c) City, State, and ZIP Code<br><b>Jamestown, NC 27282</b>                |

**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)<br><b>NA</b> |
| (b) Address (number and street)<br><b>NA</b> |
| (c) City, State, and ZIP Code<br><b>NA</b>   |

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><b>Jeffrey Martin Phillips</b> | Date<br><b>2/3/14</b> |
|----------------------------------------------------------|-----------------------|

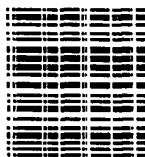
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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| <input type="checkbox"/> USPS First Class Mail | Postmarked |
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| <input checked="" type="checkbox"/> USPS Registered/Certified | Postmarked (R/C)<br>2/4/14 |
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| <input type="checkbox"/> USPS Priority Mail | Postmarked |
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| <input type="checkbox"/> USPS Priority Mail Express | Postmarked |
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| <input type="checkbox"/> Overnight Delivery Service (Specify): | Shipping Date                                       |
|                                                                | Next Business Day Delivery <input type="checkbox"/> |

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| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
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| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
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| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
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| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |
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