Image# 13961282220 PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	James Joseph Graves										
	(b) Address (number and street) 37 Highbanks Place	☐ Check if address changed				Candidate's FEC Identification Number H2MN06198					
	(c) City, State, and ZIP Code					3. Is This	Ne	W		Amended	
	St Cloud		MN	5630	11	Statemen	t X (N)	OR		(A)	
4.	Party Affiliation	5. Office Sough	nt		6. State & Dist	rict of Candidate)				
	DEMOCRATIC-FARM-LABOR	House			MN	06					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)										
Jim Graves for Congress											
	(b) Address (number and street)										
	PO BOX 971										
-	(c) City, State, and ZIP Code										
	St Cloud				MN	56302					
	D.F.			.ED 411	T	001111					
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 exa	mined this State	ement and to	the best of	my knowledge a	and belief it is tru	ie, correct a	and compl	ete.		
Si	gnature of Candidate					Date					
Ja	ames J Graves	[Electronically Filed]				04/11/2013					
				[Elec	ironically Fileaj	0 1,7 1,7 20 10					
_											
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											
1											

FEC FORM 2 (REV. 02/2009)