

SECRETARY OF THE SENATE
10 FEB -3 PM 1:57

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Willie "Will" Boyd Jr		
(b) Address (number and street) <input type="checkbox"/> Check if address changed 1206 Killarney Dr.		2. Candidate's FEC Identification Number C00471433
(c) City, State, and ZIP Code Greenville IL 62246		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
4. Party Affiliation Independent	5. Office Sought U.S. Senator	6. State & District of Candidate Illinois

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) Will Boyd For U.S. Senate
(b) Address (number and street) 1206 Killarney Dr.
(c) City, State, and ZIP Code Greenville IL 62246

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

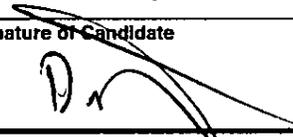
(Including Joint Fundraising Representatives)

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 1-22-10
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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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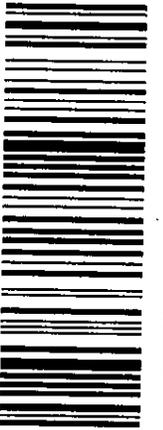
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FIRST CLASS

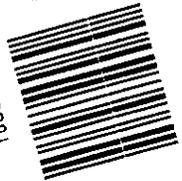
FIRST CLASS

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U.S. POSTAGE
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Boyd

Lenny D.

IL 62246

To: Office of Public Records

P.O. Box 2517

Alexandria VA 22301-0517

72212103801

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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

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FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
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AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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Date of Receipt

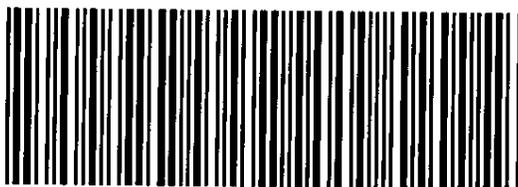
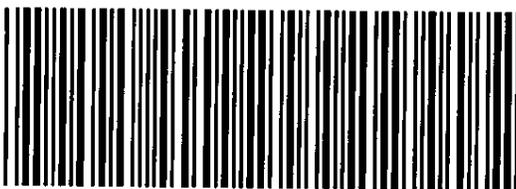
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PREPARER RD DATE PREPARED 02-03-10

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