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FEC FORM 2

STATEMENT OF CANDIDACY

	e of Candidate (in full)								
	and, K., Ross, ,					100	. == - · ·		
	ess (number and street) Stagecoach Ridge	☐ Check if address changed				Candidate's FEC Identification Number H8GA13019			
(c) City, S	State, and ZIP Code					3. Is This		ew	Amended
Stoc	kbridge		GA	3028	1	Stateme	ent 🗶 (N	l) OR	(A)
4. Party Affi	liation	5. Office Sought			6. State & Dist	rict of Candida	ate		
REPUB	LICAN PARTY	House			GA	13			
	DE	SIGNATION	OF PRIN	CIPAL	CAMPAIGN	и сомміт	TEE		
7. I hereby	designate the following nar	med political comn	nittee as my F	Principal C	Campaign Comr	_	2018 (year of elec		on(s).
NOTE: T	his designation should be	iled with the appro	opriate office I	isted in th	e instructions.				
(a) Name	e of Committee (in full)								
K F	Ross Newalnd Fo	r Congress							
	ess (number and street) Stagecoach Ridge								
(c) City, S	State, and ZIP Code								
Sto	ckbridge				GA	30281			
	DE	CICNIATION	OF OTHE	בווא סי	THORIZED.	COMMITT	EEC		
	DE	SIGNATION			Representativ		EE2		
		(IIICI	luding John Fi	unuraisin	g Representativ	es)			
8. I hereby a	authorize the following nan y.	ned committee, wh	nich is NOT m	y principa	al campaign con	nmittee, to rec	eive and ex	pend funds	on behalf of my
NOTE: T	his designation should be f	iled with the princi	pal campaign	committe	ee.				
(a) Name	e of Committee (in full)								
(4) 114.116	, or commute (iii raii)								
(b) Addre	ess (number and street)								
(c) City, S	State, and ZIP Code								
(c) City, S	State, and ZIP Code								
(c) City, S	State, and ZIP Code								
(c) City, S	State, and ZIP Code I certify that I have exa	mined this Statem	nent and to the	e best of r	my knowledge a	and belief it is t	rue, correct	and compl	'ete.
	I certify that I have exa	mined this Statem	eent and to the	e best of ı	my knowledge a		rue, correct	and comp	lete.
Signature of	I certify that I have exa	mined this Statem	nent and to the	e best of I	my knowledge a	Date		and compl	ete.
	I certify that I have exa	mined this Statem	eent and to the		ny knowledge a			and compi	lete.
Signature of	I certify that I have exa	mined this Statem	nent and to the			Date		and compl	lete.
Signature of Newland, K.	I certify that I have exa			[Elect	ronically Filed]	Date 01/05/201	8		
Signature of Newland, K.	I certify that I have exact of Candidate , Ross, ,			[Elect	ronically Filed]	Date 01/05/201	8		
Signature of Newland, K.	I certify that I have exact of Candidate , Ross, ,			[Elect	ronically Filed]	Date 01/05/201	8		

FEC FORM 2 (REV. 02/2009)