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FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) LAWRNCE JOSEPH KAIFESH			2. Identification Number
(b) Address (number and street) 602 IVARENE CT, #2D		<input type="checkbox"/> Check if address changed	
(c) City, State, and ZIP Code CARPENTERSVILLE, IL 60110		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)	
4. Party Affiliation REPUBLICAN	5. Office Sought U.S. REPRESENTATIVE	6. State & District of Candidate ILLINOIS, 8th CONGRESSIONAL DISTRICT	

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) KAIFESH FOR CONGRESS
(b) Address (number and street) 869 E SCHAUMBURG RD, #377
(c) City, State, and ZIP Code SCHAUMBURG, IL 60194

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 10-7-2013
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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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FEC FORM 2 (REV. 12/2008)

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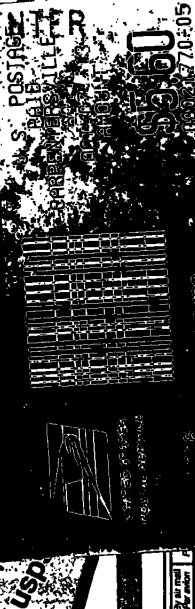
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