Carl Mumpower, Ph.D.
A Private Therapy Practice
Clinical, Family, and Organizational Psychology
Suite 309 . One Oak Plaza . Asheville, North Carolina 28801
828-252-8390 ~ drmumpower@aol.com (E-mail)

N.C. Licensed Psychologist N.C. Licensed Health Service Provider N.C. Licensed Marital and Family Therapist

November 1, 2007

Federal Election Commission
999 E. Street NW
Washington, DC 20463

To whom this may conern:

Enclosed are FEC Form 1 and Form 2 for Ralph Carl Mumpower III.

You may contact Dr. Mumpower at the address above if further information is required.

Sincerely,

Waynette Scruggs
Administrative Assistant to Dr. Carl Mumpower

FEC FORM 2
STATEMENT OF CANDIDACY

RECEIVED
FEC MAIL CENTER
2007 NOV -5 AM 11:35

1. (a) Name of Candidate (in full)
Ralph Carl Mumpower, III

(b) Address (number and street) ☐ Check if address changed
One Oak Plaza Ste. 309

(c) City, State, and ZIP Code
Asheville NC 28801

2. Identification Number

3. Is This Statement ☒ New (N) OR ☐ Amended (A)

4. Party Affiliation: Republican

5. Office Sought: US House

6. State & District of Candidate: North Carolina 11th District

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2008 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)
Mumpower for Congress Committee

(b) Address (number and street)
One Oak Plaza Ste. 309

(c) City, State, and ZIP Code
Asheville, NC 28801

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

DECLARATION OF INTENT TO EXPEND PERSONAL FUNDS (House or Senate Only)

9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) by

9A 0.00 for the primary election, and

9B 0.00 for the general election.

If you do not intend to expend personal funds exceeding the threshold amount for either election, you must enter "0.00" for each.

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 Ralph Carl Mumpower III

Date 10-31-07

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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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

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JMD PREPARER	11/5/07 DATE PREPARED

(3/2005)

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