

Image# 11953345298

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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) ROBERT L TURNER		
(b) Address (number and street) PO BOX 140016		<input checked="" type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code HOWARD BEACH NY 11414		2. Candidate's FEC Identification Number HONY09072
4. Party Affiliation REPUBLICAN PARTY		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
5. Office Sought House	6. State & District of Candidate NY 09	

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 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) BOB TURNER FOR CONGRESS, INC		
(b) Address (number and street) PO BOX 140016		
(c) City, State, and ZIP Code HOWARD BEACH NY 11414		

### 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 ROBERT L TURNER  [Electronically Filed]	Date 12/28/2011
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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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Form/Schedule: F2N

Transaction ID :

This is an amendment of the Form 1 originally filed on 7/17/2011.

Form/Schedule:

Transaction ID: