FEC FORM 2
STATEMENT OF CANDIDACY

FLDERAL ELECTION
GOMMISSION
PUBLIC DISCLOSURE
DIVISION

2017 JUL 10 AM 10: 19

1.	(a) Name of Candidate (in full) JOHN E WEBB												. ==-
_	(b) Address (number and street)						2. FEC Candidate Identification Number						
	23906 S STATE RTE D)					$C \Omega$	056	5523				
	(c) City, State, and ZIP Code CLEVELAND, MO 6473					3.	Is Thi Stater	-	X (I	lew N)	OR		Amended (A)
4.	Party Affiliation	5. Office Sought			6. State & Dist			idate					
_	REPUBLICAN	HOU	SE		MO)4					-	
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE												
7.	I hereby designate the following nar	med political comr	nittee as my Pri	ncipal Ca	ampaign Comr	mitte	e for the	<i></i>	2018	ntion'	electio	on(s).	•
	NOTE: This designation should be filed with the appropriate office listed in the instructions.												
	(a) Name of Committee (in full)												
	JOHN WEBB FOR CO	ONGRESS											•
	(b) Address (number and street)												
	23906 S STATE RT	E D											
	(c) City, State, and ZIP Code								· ·				
	CLEVELAND, MO	64734											
Τ									-				
	DE	SIGNATION (Inc	OF OTHER				MMIT	ΓΤΕΙ	ES				
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												<u></u> -
I certify that Wave examined this Statement and to the best of my knowledge and belief it is true, correct and complete.													
S	ignature of Candidate			11		Da	ate						
	Cfo an	C [N	all				07/	07/2	2017				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.													
													
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FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	of	i

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

3.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of andidacy. 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						
3.	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						
3.	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						
	·						
В.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalt 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)						
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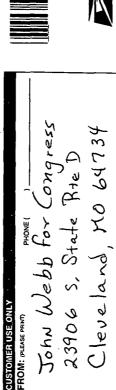
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