

**Brungardt Hower****Ward Elliott & Pfeifer L.C.**

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and  
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OFFICES IN HAYS AND GARDEN CITY

**FAX COVER MEMO**TO: FECFAX NO. 202-219-0174Reports & Analysis

FAX NO. \_\_\_\_\_

FAX NO. \_\_\_\_\_

FROM: Marilyn WasingerDATE: 02/21/14RE: Robert K. Wasinger, Wasinger for CongressTOTAL PAGES: 6

Please call (785) 628-8238 if you do not receive all pages.

COMMENTS: Enclosed find a copy of Form 2 Statement of Candidacy - Robert K. Wasinger - signed 2-10-12Enclosed find a copy of Form 1 Statement of Organization - Wasinger for Congress 2-14-14The originals were sent to your office on 2-12-14 and 2-15-14**ORIGINAL TRANSMISSION DOCUMENT TO FOLLOW VIA:**

Regular Mail \_\_\_\_\_

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Will Not Follow x

Other \_\_\_\_\_

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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) ROBERT K WASINGER			2. Identification Number	
(b) Address (number and street) 10638 TIMBERIDGE RD		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code FAIRFAX STATION, VA 22039		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN	5. Office Sought HOUSE	6. State & District of Candidate VIRGINIA, DISTRICT 10		

### 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) WASINGER FOR CONGRESS
(b) Address (number and street) 10638 TIMBERIDGE RD
(c) City, State, and ZIP Code FAIRFAX STATION, VA 22039

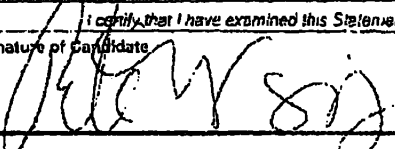
### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(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 1-10-2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. 5437g.

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FEC FORM 2 (REV. 12/2008)

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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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<input type="checkbox"/> Postmark Illegible	
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<input type="checkbox"/> No Postmark	
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<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
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<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
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N/A  
PREPARER

N/A  
DATE PREPARED

(8/2013)

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