FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)
Nancy L. Olson

(b) Address (number and street) ☐ Check if address changed
405 Old Oregon Road

(c) City, State, and ZIP Code
Oshkosh, WI 54902

2. Identification Number

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

4. Party Affiliation: Republican

5. Office Sought: US Representative House

6. State & District of Candidate: WI 6th Congressional

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 (year of election) election(s).

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)
~~Olson 4 Congress~~ Nancy L. Olson for Congress

(b) Address (number and street)
PO Box 3871

(c) City, State, and ZIP Code
Oshkosh, WI 54903

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: Nancy L Olson

Date: 05/30/2014

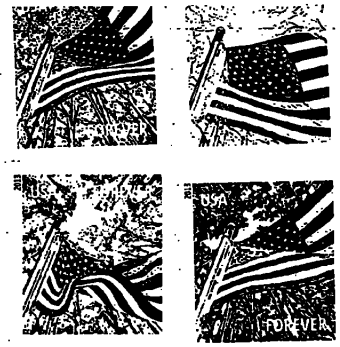
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

FEC FORM 2 (REV. 12/2008)

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Federal Election Commission
999 E Street NW
Washington DC 20463

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Federal Election Commission
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PREPARER	DATE PREPARED 6/13/14

(8/2013)