

Image# 14978042342

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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) DARLENE SENGER			2. Candidate's FEC Identification Number H4IL11195	
(b) Address (number and street) PO BOX 4883		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code NAPERVILLE IL 60567		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation Rep	5. Office Sought House	6. State & District of Candidate IL 11		

### 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) SENGER FOR CONGRESS		
(b) Address (number and street) PO BOX 4883		
(c) City, State, and ZIP Code NAPERVILLE IL 60567		

### 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) YOUNG GUNS DAY II 2014		
(b) Address (number and street) 228 S WASHINGTON ST STE 115		
(c) City, State, and ZIP Code ALEXANDRIA VA 22314		

*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 DARLENE SENGER  [Electronically Filed]	Date 09/30/2014
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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 2S - STATEMENT OF CANDIDACY (Supplemental Page)

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

Republicans Inspiring Success & Empowerment Project (RISE PROJECT)

(b) Address (number and street)

PO Box 2485

(c) City, State and ZIP Code

Springfield

VA

22152

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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(c) City, State and ZIP Code