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2009 AUG 13 AM 9:46

FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) <i>Bill Stouffer</i>		2. Candidate's FEC Identification Number	
(b) Address (number and street) <i>P.O. Box 1001</i>		<input type="checkbox"/> Check if address changed	
(c) City, State, and ZIP Code <i>Marshall MO 65340</i>		3. Is This Statement <input checked="" type="checkbox"/> New (N) <input type="checkbox"/> OR <input type="checkbox"/> Amended (A)	
4. Party Affiliation <i>Republican</i>	5. Office Sought <i>House</i>	6. State & District of Candidate <i>Missouri - 04</i>	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2010 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) <i>Stouffer for Congress</i>	
(b) Address (number and street) <i>P.O. Box 445</i>	
(c) City, State, and ZIP Code <i>Jefferson City MO 65101</i>	

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 <i>Bill Stouffer</i>	Date <i>08/07/2009</i>
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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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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.

	Date of Receipt
<input type="checkbox"/> Hand Delivered	
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify):	<i>Fed Ex</i> Shipping Date <i>8/11/09</i>
	Next Business Day Delivery <input checked="" type="checkbox"/>
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>✓</i> <i>8/13/09</i>	
PREPARER (3/2005)	DATE PREPARED