

Image# 201512189004341359

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Renee Jacisin Ellmers			2. Candidate's FEC Identification Number H0NC02059	
(b) Address (number and street) PO Box 99567		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Raleigh NC 27624		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate NC 02		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) Renee Ellmers for Congress Committee		
(b) Address (number and street) PO BOX 99567		
(c) City, State, and ZIP Code RALEIGH NC 27624		

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) 2015 SXSW GOP COMMITTEE		
(b) Address (number and street) 2470 DANIELS BRIDGE RD STE 121		
(c) City, State, and ZIP Code Athens GA 30606		

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 Renee Jacisin Ellmers <i>[Electronically Filed]</i>	Date 12/18/2015
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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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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)

Pioneer Project Wine Club

(b) Address (number and street)

824 S Milledge Ave STE 101

(c) City, State and ZIP Code

Athens

GA

30605

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

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[ADDITIONAL]

(Including Joint Fundraising Representatives)

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