

FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) TRACY LYNN TURNER		2. Candidate's FEC Identification Number
(b) Address (number and street) <input type="checkbox"/> Check if address changed 14637 MAGNOLIA BLVD #11		
(c) City, State, and ZIP Code SHERMAN OAKS, CALIFORNIA 91403		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation IND	5. Office Sought US CONGRESS	6. State & District of Candidate CALIFORNIA 38th District

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) TRACY Turner for Congress
(b) Address (number and street) 14637 MAGNOLIA BLVD #11
(c) City, State, and ZIP Code SHERMAN OAKS, CA 91403

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

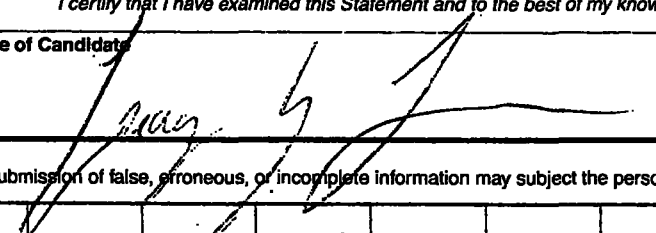
(Including Joint Fundraising Representatives)

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 4/13/2010
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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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2010 MAY -6 A 10:00

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PREPARER
(3/2005)

5/6/10
DATE PREPARED

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