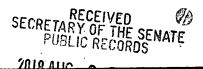
FEC FORM 2 STATEMENT OF CANDIDACY



<i>y</i> 1 <i>r</i>	ALLINEITI OI OTATE	107101					HB	40-	-	1100 11		
1. (a) Name of Candidate (in full)							- U -	7	PHI	Z: U	8
	Charlie Hardy		 		12	1-1	A A4					
(b) Address (number and street) 620 E 18 Street	Check if add	dress changed		2.	Identifica	DON N			,		
(C) City. State, and ZIP Code				3.	Is This	ſ	-1	vew.			Amended
	Cheyenne, WY 82001				<u> </u>	Statem		<u> </u>	N)	OR	<u> </u>	(A)
4. Pa	arty Affiliation	5. Office Sought		6. State & Distr		of Candid	ate					
	Republican	U.S. Senate		Wyoming								
		ESIGNATION OF P							n			
	hereby designate the following na				mitte	e for the		of el	ection	electio	ın(s).	
N	OTE: This designation should be	filed with the appropriate	office listed in t	he instructions.								
(a	a) Name of Committee (in full)											
	People with Charlie	•					- -					
(t	b) Address (number and street)											
	620 E 18 Street											
(0	c) City. State, and ZIP Code					•						
	Cheyenne, WY 82	2001										
	DI	ESIGNATION OF C	THER AU	THORIZED	CC	TIMMC	TEE	S				
		(Including	Joint Fundraisii	ng Representativ	ves)							
	hereby authorize the following na andidacy.	med committee, which is	NOT my princip	oal campaign cor	mmi	ttee, to re	ceive	and (expen	d funds	on be	chalf of my
N	IOTE: This designation should be	filed with the principal car	mpaign commit	tee.								
(i	a) Name of Committee (in full)										· · · · · · ·	
	b) Address (number and street)			· · · · · · · · · · · · · · · · · · ·			,				,	
-	c) City, State, and ZIP Code		-				-					
	I certify that I have ex	camined this Statement ar	nd to the best o	f my knowledge	and	belief it i	s true.	com	ct an	d compl	ete.	
Sig	nature of Candidate				1 _	ate						
	Charle	s E. Hardy	/			0	7/	2	7/.	201	18	
NU.	TE: Submission of false, erroneou	s, or incomplete informati	on may subject	the person sign	ing (his State	ment t	o pe	natties	of 2 U.	S.C. §	437g.
		,		T	Ť		Τ		T			
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