## FEC FORM 2 STATEMENT OF CANDIDACY

RECEIVED

(a) Name of Candidate (in full)  MISSIBNARY-TRACEY ELAINE BLAIR  (b) Address (number and street)  Perly Affiliation  Sought  Sought  DESIGNATION OF PRINCIPAL CAMPAIGN FOR W  (a) Name of Committee (in full)  SIDNARY-TRACEY ELAINE BLAIR CAMPAIGN FOR W  (b) Address (number and street)  DESIGNATION OF OTHER AUTHORIZED COMMIT  (c) City, State, and ZIP Code  DETROIT, MICHIER AUTHORIZED COMMIT  (Including Joint Fundraising Representatives)  I hereby authorize the following named committee, which is NOT my principal campaign committee, to recandidacy.  NOTE: This designation should be filed with the principal campaign committee, to recandidacy.	ITTEE  Selection(s).  (year of election)  ITTEE  CAN
(b) Address (number and street)  (c) City, State, and ZIP Code  (c) City, State, and ZIP Code  (d) ETROLT  (e) THE HEAD  (e) City, State, and ZIP Code  (f) ETROLT  (f) Soffice Sought  (g) City, State, and ZIP Code  (g) ETROLT  (g) Soffice Sought  (g) City, State, and ZIP Code  (g) ETROLT  (g) Soffice Sought  (g) Sought  (g) Soffice Sought  (g)	New Amended (N) OR (A) Amended (A) INTEE (S) (Year of election)
(c) City, State, and ZIP Code    Society State	New Amended (N) OR (A) Amended (A) INTEE (S) (Year of election)
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Party Affiliation    S. Office Sought   S. State & District of Candin NOE PENDENT   U.S., PRESIDENT   MICHIGAN	ITTEE  JOI 2 election(s).  (year of election)  (S. PRESIDENTIAL ELECT WRIT CAN
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEED COMMITTEE This designate the following named political committee as my Principal Campaign Committee for the NOTE: This designation should be filed with the appropriate office listed in the instructions.  (a) Name of Committee (in full)    SSIONARY-TRACEY FLAINEBLAIR CAMPAIGN FOR With the Appropriate office listed in the instructions.  (b) Address (number and street)    O	ITTEE  20/2 election(s).  (year of election)  /, S, PRESIDENTIAL ELECT  WRIT  CAN
NOTE: This designation should be filed with the appropriate office listed in the instructions.  (a) Name of Committee (in full)  SSIONARY-TRACEY LLA INEBLAIR CAMPAIGN FOR U  (b) Address (number and street)  P. O., BOX 2035  (c) City, State, and ZIP Code  DETROIT, MICH, 48202  DESIGNATION OF OTHER AUTHORIZED COMMIN  (Including Joint Fundraising Representatives)  I hereby authorize the following named committee, which is NOT my principal campaign committee, to recardidacy.	(year of election)  I, S, PRESIDENTIAL ELECT  WRIT  CAN
NOTE: This designation should be filed with the appropriate office listed in the instructions.  (a) Name of Committee (in full)  (b) Address (number and street)  (c) Address (number and street)  (d) Address (number and street)  (e) City, State, and ZIP Code  (f) DETROIT, MICH, 48202  DESIGNATION OF OTHER AUTHORIZED COMMIT (Including Joint Fundraising Representatives)  I hereby authorize the following named committee, which is NOT my principal campaign committee, to recardidacy.	(year of election)  I, S, PRESIDENTIAL ELECT  WRIT  CAN
(a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  DETROIT, MICH, 48202  DESIGNATION OF OTHER AUTHORIZED COMMIT  (Including Joint Fundraising Representatives)  I hereby authorize the following named committee, which is NOT my principal campaign committee, to recardidacy.	I, S, PRESIDENTIAL ELECT WRIT CAN
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(b) Address (nuiriber and street)	
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(c) City, State, and ZIP Code	
I certify that I have examined this Statement and to the best of my knowledge and belief it i	is true, correct and complete,
nature of Candidate Date	
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rivieus Racul Claine Blairs Das	music 27, 20/2
TE: Submission of false, erroneous, or incomplete information may subject the person signing this State	ement to penalties of 2 U.S.C. §437g.
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or carry	"
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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 Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation<sup>™</sup> or Signature Confirmation<sup>™</sup> Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 2/6/12 DATE PREPARED