

For help completing Form 2, please double-click the

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FEC FORM 2

STATEMENT OF CANDIDACY

| | | |
|---|----------------------------------|--|
| 1. (a) Name of Candidate (in full) CLYDE CECIL HOLLOWAY | | 2. Identification Number |
| (b) Address (number and street) 11528 HWY 165 S. | | 3. Is This Statement? <input type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A) |
| (c) City, State, and ZIP Code FOREST HILL, LA 71430 | | |
| 4. Party Affiliation REPUBLICAN | 5. Office Sought HOUSE | 6. State & District of Candidate LA, DISTRICT 05 |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2013 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) FRIENDS OF CLYDE HOLLOWAY For Congress | |
| (b) Address (number and street) P. O. BOX 340 | |
| (c) City, State, and ZIP Code FOREST HILL, LA 71430 | |

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 Clyde C Holloway | Date 8-29-13 |
|---|------------------------|

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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FEC FORM 2 (REV. 12/2008)

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