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FEC MAIL CENTER

2009 MAY 26 A 9 08

**Schroder 2010
P O Box 264
Exton, PA 19341**

May 15, 2009

Federal Election Commission
999 E. Street NW
Washington, DC 20463

Dear Sir or Madam,

Enclosed please find FEC Form 2 for Curt Schroder. If you require any further information, please contact us at the above address.

Thank you.

Very truly yours,



Mark S. Toolan

29030092483

FEC FORM 2

STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) CURT SCHRODER		2009 MAY 26 A 9:08
(b) Address (number and street) <input type="checkbox"/> Check if address changed 3760 E. FISHERVILLE ROAD		2. Candidate's FEC Identification Number
(c) City, State, and ZIP Code DOWNINGTOWN, PA 19335		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation REP	5. Office Sought US REP	6. State & District of Candidate PA 6

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) SCHRODER 2010
(b) Address (number and street) P O BOX 264
(c) City, State, and ZIP Code EXTON, PA 19341

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 Curt Schoder	Date 5/15/09
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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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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Jac H
 PREPARER

5/26/09
 DATE PREPARED

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