

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Anthony David Tomkins		2. Candidate's FEC Identification Number H6ID02183
(b) Address (number and street) 2711 Marshall Ln		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Twin Falls		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
4. Party Affiliation CON	5. Office Sought House	6. State & District of Candidate ID 02

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) ANTHONY TOMKINS FOR IDAHO	
(b) Address (number and street) 2711 MARSHALL LN	
(c) City, State, and ZIP Code TWIN FALLS ID 83301	

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 Anthony D Tomkins	Date 03/11/2016
<i>[Electronically Filed]</i>	

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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