

**FEC FORM 2
STATEMENT OF CANDIDACY**

1. (a) Name of Candidate (in full) Kander, Jason, , Hon.,		2. Candidate's FEC Identification Number S6M000362	
(b) Address (number and street) PO Box 548		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)	
(c) City, State, and ZIP Code Columbia, MO 65205		6. State & District of Candidate MO	
4. Party Affiliation DEM	5. Office Sought Senate		

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)
Missourians for Kander

(b) Address (number and street)
PO Box 548

(c) City, State, and ZIP Code
Columbia, MO 65201

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)
Justice 2016

(b) Address (number and street)
918 Pennsylvania Ave. SE

(c) City, State, and ZIP Code
Washington, DC 20003

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 	Date 5 OCT 2016
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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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FORM 2S - STATEMENT OF CANDIDACY (SUPPLEMENTAL PAGE)

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Battleground Victory 2016

(b) Address (number and street)

120 Maryland Avenue NE

(c) City, State, and ZIP Code

Washington, DC 20002

DESIGNATION OF OTHER AUTHORIZED COMMITTEES [ADDITIONAL]
(Including Joint Fundraising Representatives)

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)

Silicon Valley Victory 2016

(b) Address (number and street)

120 Maryland Avenue NE

(c) City, State, and ZIP Code

Washington, DC 20002

DESIGNATION OF OTHER AUTHORIZED COMMITTEES [ADDITIONAL]
(Including Joint Fundraising Representatives)

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)

2016 Senate IMPACT

(b) Address (number and street)

918 Pennsylvania Ave SE

(c) City, State, and ZIP Code

Washington, DC 20003

DESIGNATION OF OTHER AUTHORIZED COMMITTEES [ADDITIONAL]
(Including Joint Fundraising Representatives)

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)

201610110200399528

Faxed
or
Hand Delivered

201610110200399529

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 10-11-16
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

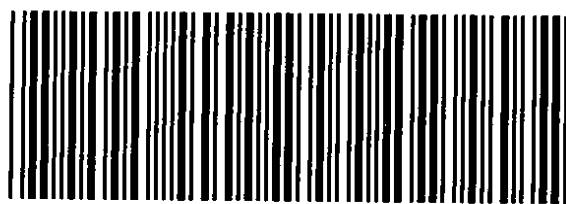
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

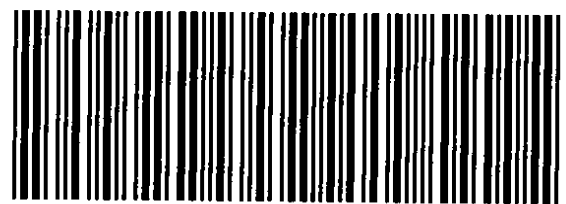
OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 10-11-16

201610110200399530



SEN PATCH



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201610110200399531