

FEC FORM 2

STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) <u>Gail Eldred Boliver</u>		2. Candidate's FEC Identification Number
(b) Address (number and street) ☐ Check if address changed <u>2017 Stratford Lane</u>		
(c) City, State, and ZIP Code <u>Marshalltown, IA. 50158</u>		3. Is This Statement ☒ New (N) OR ☐ Amended (A)
4. Party Affiliation <u>Republican</u>	5. Office Sought <u>Congress</u>	6. State & District of Candidate <u>IA; 1</u>

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 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) <u>Boliver for Congress</u>
(b) Address (number and street) <u>2414 S. 2nd. St.</u>
(c) City, State, and ZIP Code <u>Marshalltown, IA. 50158</u>

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 <u>Gail E Boliver</u>	Date <u>01-04-2014</u>
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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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Gail Boliver
Boliver Law Firm
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Marshalltown, IA 50158

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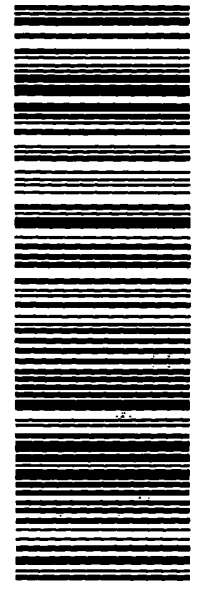
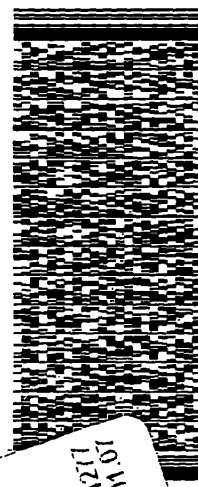
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