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FEC FORM 2 STATEMENT OF CANDIDACY

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FEC FORM 2 (REV. 02/2009)

1.	(a) Name	of Candidate								2014	MAR 20	Ariti	1 13 bd
	TA	MARG	HAT	RIS	JOHN	SON					- MA 1	CEN	TEQ
		ss (number a						2. Candida	ate's FEC	Identific	ation Num	berULIV	T Later
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	(c) City, S	State, and ZIP	Code		,			3. Is Thi		New	OB	Amen	ded
_	51	eming	ham,	5. Office Sou	35203		O Otata O Dia			(N)	OR	(A)	
4.			_	5. Office Sou	gnt Common a		6. State & Dis	thet of Candi	uate 1'+h /	90-01		17	bot.
	JEM	rocrat		U. S.	Congre	22	Alaba	ima, -		Drige	162210	nal L	712111
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE 7. I hereby designate the following named political committee as my Principal Campaign Cammittee for the 2014 election(s).												
7.	I hereby o	designate the	following nan	ned political co	ommittee as n	ny Principal C	ampaign Cam	mittee for the		election)		s).	
	NOTE: TI	nis designatio	n should be fi	led with the a	apropriate offi	ce listed in th	e instructions.						
	(a) Name	of Committee	e (in full)										
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	Con	1m, 718	EE 10	Elec	+ 1A	MARA	HARM	us V)hns	on -	or	Congr	<u>223</u>
	(b) Addré	ss (number a	nd street)									0	
	1509-A STh AVERUE, North (c) City, State, and ZIP Code												
	(c) City, S	State, and ZIP	Code	<u>n 171</u>	rnue	, 0100	, I <i>Y</i>)						
	B	ร์เพา	chan	, AL	3570	3							
	Birmingham, AL 35203												
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)													
8.	I hereby a		following nam	ed committee	, which is NO	T my principa	ıl campaign co	mmittee, to re	eceive ar	d expend	l funds on	behalf of I	my
	NOTE: This designation should be filed with the principal campaign committee.												
_	(a) Name	of Committee	e (in full)					· · · · · · · · · · · · · · · · · · ·					
												•	
	(b) Addre	ss (number a	nd street)							· · · · · · · · · · · · · · · · · · ·			
	(a) City S	State and 7ID	Codo										
	(c) City, S	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.												
01													
51	gnature o	f Candid=te	,	(\mathcal{L}			Date					•
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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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