

# FEC FORM 2

## STATEMENT OF CANDIDACY

RECEIVED  
2011 APR 15 AM 9:17  
FEC MAIL CENTER

1. (a) Name of Candidate (in full) <b>ROBERT FROST</b>		2. Candidate's FEC Identification Number		
(b) Address (number and street) <b>18126 W. CLIFTON RD</b>		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code <b>LAKEWOOD OH 44107</b>		3. Is This Statement <input checked="" type="checkbox"/> New (N) <input type="checkbox"/> OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation <b>REPUBLICAN</b>	5. Office Sought <b>HOUSE</b>	6. State & District of Candidate <b>OH 10</b>		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the **2012** 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) <b>FROST FOR CONGRESS</b>	
(b) Address (number and street) <b>30628 DETROIT RD., #201</b>	
(c) City, State, and ZIP Code <b>WESTLAKE OH 44145</b>	

### 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 	Date <b>4/14/2011</b>
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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**

The FEC added this page to the end of this filing to indicate how it was received.

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Delivery Confirmation™ or Signature Confirmation™ Label		<input type="checkbox"/>
<input type="checkbox"/>	USPS Express Mail	Postmarked
<input type="checkbox"/>	Postmark Illegible	
<input type="checkbox"/>	No Postmark	
<input checked="" type="checkbox"/>	Overnight Delivery Service (Specify): <i>UPS</i>	Shipping Date <i>4/14/11</i>
		Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/>	Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/>	Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/>	Other (Specify):	Date of Receipt or Postmarked
<i>[Signature]</i> PREPARER (3/2005)	<i>4/15/11</i> DATE PREPARED	