

# FEC FORM 2

## STATEMENT OF CANDIDACY

RECEIVED

2013 MAY 21 PM 1:21

1. (a) Name of Candidate (in full)  
KAREN SPILKA

FEC MAIL CENTER

(b) Address (number and street) 18 ROME WAY		<input type="checkbox"/> Check if address changed	2. Candidate's FEC Identification Number
(c) City, State, and ZIP Code ASHLAND		MA 01721	3. Is This Statement <input checked="" type="checkbox"/> New <input type="checkbox"/> (N) OR <input type="checkbox"/> Amended <input type="checkbox"/> (A)
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate MA 05	

## 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)

KAREN SPILKA FOR CONGRESS COMMITTEE

(b) Address (number and street) 18 ROME WAY	
(c) City, State, and ZIP Code ASHLAND MA 01721	

## 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.

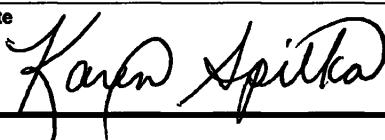
(a) Name of Committee (in full)

(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

KAREN SPILKA



Date

May 17, 2013

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.

	Date of Receipt
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
	
PREPARER (3/2005)	DATE PREPARED 5/21/13