

FEC FORM 2

STATEMENT OF CANDIDACY

FEDERAL ELECTION COMMISSION
PUBLIC DISCLOSURE DIVISION

2013 APR -3 PM 12:22

1. (a) Name of Candidate (in full) Bob Fuehr		2. Candidate's FEC Identification Number
(b) Address (number and street) 4831 South 1115 East		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Salt Lake City UT 84117		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation Rep	5. Office Sought House	6. State & District of Candidate UT 04

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) Friends of Bob Fuehr	
(b) Address (number and street) 10 West Broadway Suite 500	
(c) City, State, and ZIP Code Salt Lake City UT 84101	

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 Bob Fuehr 	Date 3/19/13
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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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Express Mail	Postmarked
<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"/> Received from House Records & Registration Office	Date of Receipt
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Jmt
 PREPARER

4/3/13
 DATE PREPARED

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