

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Angela Michael			2. Identification Number H2IL15083	
(b) Address (number and street) 812 13th. St.		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Highland, IL 62249		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation Democrat	5. Office Sought House	6. State & District of Candidate Illinois District 15		

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) Angela Michael for Congress	
(b) Address (number and street) P.O. Box 575	
(c) City, State, and ZIP Code Highland, IL 62249	

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) Pro-life Candidates	
(b) Address (number and street) 101 Cartwell Court	
(c) City, State, and ZIP Code Purgitsville, WV 26852	

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 9/28/12
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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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2012 OCT -9 PM 12:46
 FEDERAL ELECTION COMMISSION
 PUBLIC DIVISION

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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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<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> 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 type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	<i>10/9/12</i> DATE PREPARED