

Image# 201708289071129686

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Fischer, Bruce, , Dr.,			2. Candidate's FEC Identification Number H8SC07048	
(b) Address (number and street) 1026 Snowberry Dr.		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Longs SC 29568		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate SC 07		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) Dr. Bruce Fischer for Congress 2018			
(b) Address (number and street) 1026 Snowberry Dr.			
(c) City, State, and ZIP Code Longs SC 29568			

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 Fischer, Bruce, , Dr., <i>[Electronically Filed]</i>	Date 08/28/2017
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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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