

Image# 28990236705

# FEC FORM 2

## STATEMENT OF CANDIDACY

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

KIRK SCHURING

(b) Address (number and street)

1817 DEVONSHIRE NW

(c) City, State and ZIP Code

CANTON

OH

44708

Check if address changed

2. Identification Number

H8OH16066

3. Is This Statement

New (N)

OR  Amended (A)

4. Party Affiliation

REPUBLICAN PARTY

5. Office Sought

House

6. State & District of Candidate

OH 16

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2008 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)

SCHURING FOR CONGRESS COMMITTEE

(b) Address (number and street)

400 MARKET AVE NORTH SUITE 400

(c) City, State and ZIP Code

CANTON

OH

44702

### 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)

None

(b) Address (number and street)

(c) City, State and ZIP Code

### DECLARATION OF INTENT TO EXPEND PERSONAL FUNDS (House or Senate Only)

9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) by

9A

for the primary election, and

9B

for the general election.

If you do not intend to expend personal funds exceeding the threshold amount for either election, you must enter "0.00" for each.

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**

KIRK SCHURING

**Date**

01/31/2008

**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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