

Image# 15951212712

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Michael Flynn		
(b) Address (number and street) 1665 Hampshire Street		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Quincy		2. Candidate's FEC Identification Number H6IL18104
4. Party Affiliation REPUBLICAN PARTY		3. Is This Statement <input checked="" type="checkbox"/> New (N) <input type="checkbox"/> OR <input type="checkbox"/> Amended (A)
5. Office Sought House	IL 62301	6. State & District of Candidate IL 18

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2015 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)

MIKE FLYNN FOR CONGRESS

(b) Address (number and street)
212 N 6TH STREET

(c) City, State, and ZIP Code

QUINCY IL 62301

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

Michael Flynn

Date

[Electronically Filed] 04/22/2015

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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Form/Schedule: F2N

Transaction ID :

2015 Special Election.

Form/Schedule:

Transaction ID: