FEC FORM 2 STATEMENT OF CANDIDACY

(a) Name of Candidate (in full Brett Murdock)		
(b) Address (number and stre	et) Check if address of	hanged 2.1	dentification Number
407 Maple Ave.	, <u> </u>		
(c) City, State, and ZIP Code		3.	Is This New Amended
Brea, CA 92821			Statement (N) OR (A)
Party Affiliation	5. Office Sought	6. State & District of	f Candidate
Democrat	House	CA 39	
7 I hereby designate the following	DESIGNATION OF PRING ng named political committee as my P		0040
. Thereby designate the following	ng nameu politicar committee as my r	molpai Campaign Committee	(year of election)
	ld be filed with the appropriate office li	sted in the instructions.	
(a) Name of Committee (in ful	II)		
Brett Murdock			
(b) Address (number and stre	et)		
118 Chestnut	Place		
(c) City, State, and ZIP Code			
Fullerton, CA	92832		
	DESIGNATION OF OTHE	R AUTHORIZED CO	MMITTEES
		undraising Representatives)	
I hereby authorize the following candidacy.	· · ·		ee, to receive and expend funds on behalf of my
NOTE: This designation shou	ld be filed with the principal campaign	committee.	
(a) Name of Committee (in fu	<u>"</u>		
(4)	•		
/h) Address /n/	-4\		
(b) Address (number and stre	et)		
(c) City, State, and ZIP Code			
(c) City, State, and 211 Code			
(c) Oity, State, and 2ir Sode			
	ve examined this Statement and to the	e best of my knowledge and b	elief it is true, correct and complete.
	ve examined this Statement and to the	e best of my knowledge and be	
l certify that I ha	ve examined this Statement and to the		te
l certify that I ha	ve examined this Statement and to the		
I certify that I ha	m	Da	te
I certify that I ha	m	Da	10 - 1 · 2015
I certify that I ha	m	Da	10 - 1 · 2015

To print and file this form, select "Print" from the "File" menu above. In the "Print" window, select "Document" from the drop down menu labeled "Comments and Forms" Doing so will ensure that the icons and other instructions will not appear on your filing. Click here for a video printing demonstration.

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Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
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PREPARER (3/2015)	/O/S//S DATE PREPARED