

FEC FORM 2 STATEMENT OF CANDIDACY

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2009 MAY 18 A 9 09

1. (a) Name of Candidate (in full) VAN TRAN		2. Identification Number
(b) Address (number and street) <input type="checkbox"/> Check if address changed 8856 CITRUS AVE.		3. Is This Statement <input checked="" type="checkbox"/> (N) OR <input type="checkbox"/> (A)
(c) City, State, and ZIP Code WESTMINSTER CA 92683		
4. Party Affiliation Republican Party	5. Office Sought House	6. State & District of Candidate CA 47

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2010 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) VAN TRAN FOR CONGRESS
(b) Address (number and street) 2150 RIVER PLAZA DR., #150
(c) City, State, and ZIP Code SACRAMENTO CA 95833

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

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 0.00 for the primary election, and

9B 0.00 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 	Date 05/06/2009
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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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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.

29030090728

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify): Next Business Day Delivery <input type="checkbox"/>	Shipping Date
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JSD
 PREPARER
 (3/2005)

5/18/09
 DATE PREPARED