

# FEC FORM 2

## STATEMENT OF CANDIDACY

SECRETARY OF THE SENATE

17 APR -3 PM 4:41

1. (a) Name of Candidate (in full) Bowden, Craig, . .		2. Candidate's FEC Identification Number	
(b) Address (number and street) 2888 N 400 E		<input type="checkbox"/> Check if address changed	
(c) City, State, and ZIP Code North Ogden UT 84414		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)	
4. Party Affiliation LIBERTARIAN	5. Office Sought Senate	6. State & District of Candidate UT 00	

### 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) Craig Bowden for Senate	
(b) Address (number and street) 2888 N 400 E	
(c) City, State, and ZIP Code North Ogden UT 84414	

### 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 Bowden, Craig, . . 	Date 03/26/2017
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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.

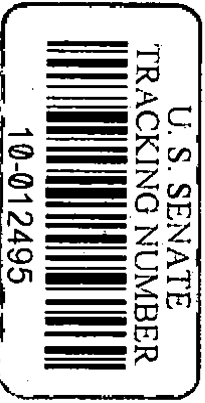
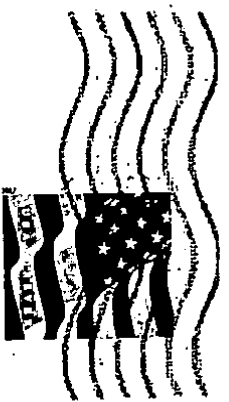
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Craig Bonden for Senate  
2588 N. 400 E.  
North Ogden, UT 84414

SALT LAKE CITY UT 840

29 MAR 2017 PM 2 L



Office of Public Records

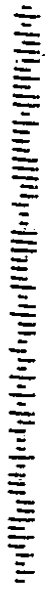
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Washington, DC 20013-7578

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BY THE SENATE  
POST OFFICE

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# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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OVERNIGHT DELIVERY SERVICE:

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FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
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AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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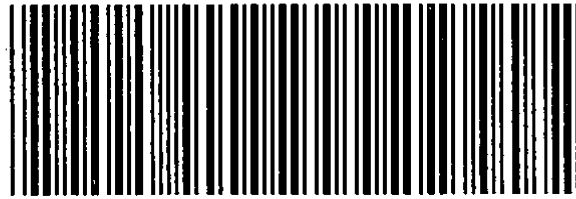
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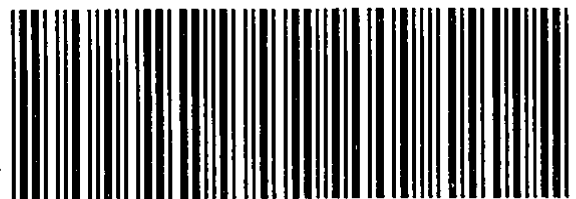
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Date of Receipt or Postmark

PREPARER HB DATE PREPARED 4/3/17

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