

# FEC FORM 2

## STATEMENT OF CANDIDACY

REPUBLICAN PARTY OF THE SENATE

17 APR -3 PM 4:40

|  |                                      |  |
|--|--------------------------------------|--|
| 1. (a) Name of Candidate (in full)<br><b>Jay Gregory Craddock</b>  |                                      | 2. FEC Candidate Identification Number   |
| (b) Address (number and street) <input type="checkbox"/> Check if address changed<br><b>1760 Linn Lane</b> |                                      | 3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A) |
| (c) City, State, and ZIP Code<br><b>Las Vegas, Nevada, 89156</b>   |                                      |  |
| 4. Party Affiliation<br><b>Democrat</b>  | 5. Office Sought<br><b>US Senate</b> | 6. State & District of Candidate<br><b>Nevada</b>  |

### 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)<br><b>Committee to Elect Jay Craddock</b> |
| (b) Address (number and street)<br><b>1760 Linn Lane</b>                  |
| (c) City, State, and ZIP Code<br><b>Las Vegas, Nev, 89156</b>             |

### 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<br> | Date<br><b>3/28/17</b> |
|---|------------------------|

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
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201704030200085744

PRESS FIRMLY TO SEAL

MAIL **STAR**  
**EXPRESS**<sup>TM</sup>

BEST SERVICE IN THE U.S.

**SCREENED  
BY THE SENATE  
POST OFFICE**

INTERNATIONALLY,  
TOMS DECLARATION  
MAY BE REQUIRED.



ly 2013 OD: 12.5 x 9.5



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1007



20013

U.S. POSTAGE  
PAID  
BATTLE MOUNTAIN, NV  
89820  
MAR 28, 17  
AMOUNT  
**\$26.50**  
R2304W120840-04

**CUSTOMER USE ONLY**

FROM: (PLEASE PRINT)

PHONE 702 561-6558  
Jay G. Craddock  
1760 Linn Lane  
Las Vegas Nev. 89156

**PAYMENT BY ACCOUNT (if applicable)**

**DELIVERY OPTIONS (Customer Use Only)**

SIGNATURE REQUIRED Aisle: The mailer must check the "Signature Required" box if the mailer: 1) Purchases Return Receipt service; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) mail recipient or other secure location without attempting to obtain the addressee's signature on delivery.  
 No Saturday Delivery (delivered next business day)  
 Sunday/Holiday Delivery Required (additional fee, where available)  
 10:30 AM Delivery Required (additional fee, where available)  
\*Refer to USPS.com<sup>®</sup> or local Post Office<sup>®</sup> for availability.

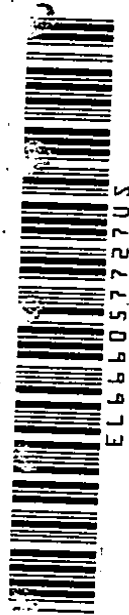
TO: (PLEASE PRINT)

PHONE ( )  
Official Public Record  
PO Box 77578  
Wash. State DC 20613-7578

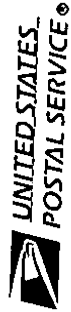
ZIP 4\* (U.S. ADDRESSES ONLY)

20013-7578

For pickup or USPS Tracking<sup>SM</sup>, visit USPS.com or call 800-222-1811.  
\$100.00 insurance included.



EL66605727US



**PRIORITY  
MAIL  
EXPRESS**<sup>TM</sup>

**ORIGIN (POSTAL SERVICE USE ONLY)**

|   |   |                                      |                              |
|---|---|--------------------------------------|------------------------------|
| <input type="checkbox"/> 1-Day                | <input type="checkbox"/> 2-Day  | <input type="checkbox"/> Military    | <input type="checkbox"/> DPO |
| PO ZIP Code<br>89820                          | Scheduled Delivery Date (MM/DD/YYYY)<br>3-31-17   | Postage<br>\$ 7.33                   | Insurance Fee<br>\$          |
| Date Accepted (MM/DD/YYYY)<br>3-28-17         | Scheduled Delivery Time<br><input type="checkbox"/> 10:30 AM <input checked="" type="checkbox"/> 12 NOON <input type="checkbox"/> 3:00 PM | Return Receipt Fee<br>\$ 2.76        | COD Fee<br>\$                |
| Time Accepted<br>5 AM                         | 10:30 AM Delivery Fee<br>\$   | Live Animal Transportation Fee<br>\$ |                              |
| Special Handling/Fragile                      | Sunday/Holiday Premium Fee<br>\$  | Total Postage & Fees<br>\$ 10.09     |                              |
| Weight<br>lbs. 3 ozs.                         | Acceptance Employee Initials  |                                      |                              |
| <b>DELIVERY (POSTAL SERVICE USE ONLY)</b>     |   |                                      |                              |
| Delivery Attempt (MM/DD/YYYY) Time<br>3-27-17 | Employee Signature<br>MC  |                                      |                              |
| Delivery Attempt (MM/DD/YYYY) Time            | Employee Signature  |                                      |                              |

LABEL 11-B, OCTOBER 2015

PSN 7690-02-000-9998

3-ADDRESSEE COPY

WRITE FIRMLY WITH BALL POINT PEN ON HARD SURFACE TO MAKE ALL COPIES LEGIBLE.

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL **3/28/17**  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

|                  | SHIPPING DATE | NEXT BUSINESS DAY DELIVERY |
|------------------|---------------|----------------------------|
| FEDERAL EXPRESS  | _____         | <input type="checkbox"/>   |
| UPS              | _____         | <input type="checkbox"/>   |
| DHL              | _____         | <input type="checkbox"/>   |
| AIRBORNE EXPRESS | _____         | <input type="checkbox"/>   |

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

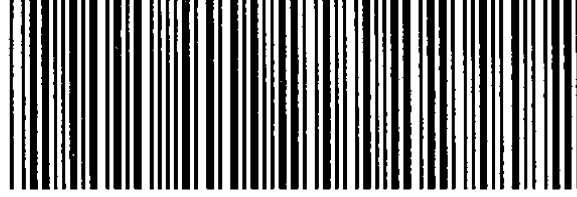
POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

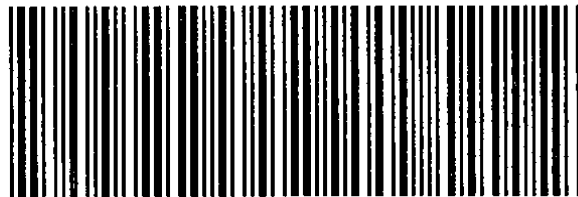
OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER **HB** DATE PREPARED **4/3/17**

201704030200085748



SEN PATCH



SEN PATCH

201704030200085747