

FEC FORM 2

STATEMENT OF CANDIDACY

1 (a) Name of Candidate (in full) DAVID KENNY LARSEN			
(b) Address (number and street) 3 HINE SALE RD		2 Candidate's FEC Identification Number	
(c) City, State, and ZIP Code LEDANON NJ 08833		3. is This Statement <input type="checkbox"/> New (N) <input checked="" type="checkbox"/> OR <input type="checkbox"/> Amended (A)	
4 Party Affiliation REPUBLICAN	5. Office Sought HOUSE OF REP.	6 State & District of Candidate N.J. DISTRICT # 7	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 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) EXP. CREATED CONGRESSIONAL COMMITTEE FOR DAVID LARSEN	} DAVID LARSEN FOR CONGRESS
(b) Address (number and street) PO Box 214	
(c) City, State, and ZIP Code OLDWICK, NJ 08858	

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) COMMITTEE TO ELECT DAVID LARSEN TO CONGRESS	} DAVID LARSEN FOR CONGRESS
(b) Address (number and street) PO Box 214	
(c) City, State, and ZIP Code OLDWICK, NJ 08858	

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 11/26/13
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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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FED FORM 2 (REV. 10/2011)

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