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2009 OCT 19 AM 11: 48

FEC FORM 2 (REV. 02/2009)

## FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)	
Joseph Clause	
(b) Address (number and street)	
3100 Oak Hollow Kd.	
(c) City, State, and ZIP Code OKlahuma City OK 73130  3. Is This Statement (N) OR (A)	ed
4. Party Affiliation 5. Office Sought 6. State & District of Candidate CK, District 5	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE	
7. I hereby designate the following named political committee as my Principal Campaign Committee for the (year of election) election(s).	
NOTE: This designation should be filed with the appropriate office listed in the instructions.	
(a) Name of Committee (in full)	
Cloud for Congress	
(b) Address (number and street)	
7.0. 13562	
(c) City, State, and ZIP Code	
Oklahoma City, OK 73113	
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 m candidacy.	y
NOTE: This designation should be filed with the principal campaign committee.	
(a) Name of Committee (in full)	
	—
(b) Address (number and street)	
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(b) Address (number and street)	
(b) Address (number and street)  (c) City, State, and ZIP Code	
(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.	
(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  Date	
(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  Date	

(3/2005)

## **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. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS** Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify): FEd. 54,9 **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):