

Image# 201510139002848802

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) MICHAEL J PAPE			2. Candidate's FEC Identification Number H6KY01128	
(b) Address (number and street) 201 MICHAEL AVE		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code HOPKINSVILLE KY 42240		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate KY 01		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) PAPE FOR CONGRESS		
(b) Address (number and street) 4537 FT. CAMPBELL BLVD		
(c) City, State, and ZIP Code HOPKINSVILLE KY 42240		

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 MICHAEL J PAPE <i>[Electronically Filed]</i>	Date 10/13/2015
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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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