

FEC FORM 2
STATEMENT OF CANDIDACY

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| | | |
|--|--------------------------------------|--|
| 1. (a) Name of Candidate (in full) <u>Elmer S. Mohr</u> | | 2. FEC Candidate Identification Number |
| (b) Address (number and street) <input type="checkbox"/> Check if address changed <u>90721 SAND DOLLAR LN</u> | | |
| (c) City, State, and ZIP Code <u>COOS BAY OREGON 97420</u> | | 3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A) |
| 4. Party Affiliation <u>Non-Partisan</u> | 5. Office Sought <u>PRESIDENT</u> | 6. State & District of Candidate <u>OREGON</u> |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) <u>Mohr for President - 2020</u> | | |
| (b) Address (number and street) <u>90721 SAND DOLLAR LN</u> | | |
| (c) City, State, and ZIP Code <u>COOS BAY, OREGON 97420</u> | | |

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 <u>Elmer S. Mohr - 02-4-18</u> | Date <u>February 4, 2019</u> |
|--|---------------------------------|

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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Optional Supplemental Page for Designation
of Additional Authorized Committees

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)

N/A

(b) Address (number and street)

(c) City, State, and ZIP Code

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

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(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code

CONFIDENTIAL - NO FORN DISSEM

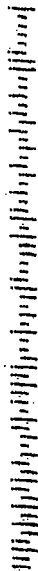
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Federal Election Commission
1450 First Street N.E.
Washington, DC 20463.

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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.

| | |
|--|---|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
| <input checked="" type="checkbox"/> USPS First Class Mail | Postmarked <u>2/5/19</u> Date of Receipt <u>2/11/19</u> |
| <input type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) |
| <input type="checkbox"/> USPS Priority Mail | Postmarked |
| <input type="checkbox"/> USPS Priority Mail Express | Postmarked |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Overnight Delivery Service (Specify): | Shipping Date |
| | Next Business Day Delivery <input type="checkbox"/> |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |
| <div style="display: flex; justify-content: space-between; align-items: flex-end;"><div>PREPARER <u>MP</u> (3/2015)</div><div><u>2/11/19</u> DATE PREPARED</div></div> | |