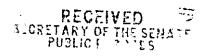
FEC FORM 2 STATEMENT OF CANDIDACY

C. 177CSS277CVAUACUVARCURATUR

9-00068



FEC FORM 2 (REV. 02/2009)

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30.5.1111.00
1. (a) Name of Candidate (in full)
(b) Address (number and street)
13597 LEPDPS POLICIOS Rd
(c) City, State, and ZIP Code (c) City, State, and ZIP Code (A) (A)
4. Party Affiliation 5. Office Sought 6. State & District of Candidate
CERUPLICAN US Senate Onio
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 or election)
NOTE: This designation should be filed with the appropriate office listed in the instructions.
(a) Name of Committee (in full)
triends to Elect Melissa McKI.
(b) Address (number and street)
13597 Leeper Perkins Rd.
(c) City, State, and ZIP Code
M. CU-11/2 DH 1/30/1/2
Mar 45VIIIE 017. 75090
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)
Charles and ZID Code
(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
Sept. 21 2017
1/ hugher Stpt. 21 2011
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.
/

FEC Form 2S (Revised 02/2017)

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Optional Supplemental Page for Designation of Additional Authorized Committees

Page	of	

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

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