EC FORM 2					RECEIVED		
STATEMENT OF C	ANDIDACY			•		N 00	AMIL: 1.1
1. (a) Name of Candidate (in	full)					i c	
Robert Eugene J					FFP	MAI	I. RENTER
(b) Address (number and s 115 McIntosh Dr		k if address changed	∎ _))	2. Identification	n Numbe	47:4 7 <u>7</u> 44	
(c) City, State, and ZIP Co Savannah, GA 3			الا	3. Is This Statement		lew N) O	R (A)
4. Party Affiliation Republican	5. Office Sought US Congress	sman	6. State & Distri GA Distric				
7. I hereby designate the folk	DESIGNATION I			ittee for the	EE 2014 ear of ele		ection(s).
	ould be filed with the approp	priate office listed in	the instructions.		<u> </u>		
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(b) Address (number and s				······	<u></u>		
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(c) City, State, and ZIP Co	le		<u></u>				
	BA 31406				ES		
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