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# FEC FORM 2

## STATEMENT OF CANDIDACY

|                                                                                                          |                                       |                                                                                                          |
|----------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------------------------------------------------------------------|
| 1. (a) Name of Candidate (in full)<br><b>Christine Connell Thron</b>                                     |                                       | 2. Candidate's FEC Identification Number                                                                 |
| (b) Address (number and street) <input type="checkbox"/> Check if address changed<br><b>P.O. Box 263</b> |                                       |                                                                                                          |
| (c) City, State, and ZIP Code<br><b>Boyd's, MD 20841-0263</b>                                            |                                       | 3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A) |
| 4. Party Affiliation<br><b>Republican</b>                                                                | 5. Office Sought<br><b>U.S. House</b> | 6. State & District of Candidate<br><b>Maryland's 8th District</b>                                       |

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2010 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)<br><b>Christine Thron for Congress</b> |
| (b) Address (number and street)<br><b>P.O. Box 53</b>                  |
| (c) City, State, and ZIP Code<br><b>Olney, MD 20830-0053</b>           |

### 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<br><b>Christine Connell Thron</b> | Date<br><b>4/11/10</b> |
|----------------------------------------------------------|------------------------|

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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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 checked="" type="checkbox"/> Hand Delivered                               | Date of Receipt<br><i>4/16/10</i> |
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| <i>[Signature]</i><br>PREPARER<br>(3/2005)                                       | <i>4/19/10</i><br>DATE PREPARED   |

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