FEC	<b>FORM</b>	2	
STATE	MENT O	E CANDIC	ACY

## RECEIVED

1. (a) Name of Candidate (in full)	<sup>₩</sup> 417 10: 3.3			
BARBARA JOY WHYMIREECMAN				
(b) Address (number and street)   Check if address changed   2710   Check if address changed   2710   Check if address changed	Pann H370			
(c) City, State, and ZIP Code	3. Is This New Amended			
TULELAKE, CH 96134	Statement (N) OR (A)			
4. Party Affiliation 5. Office Sought 6. State & Diagram CA	strict of Candidate			
DESIGNATION OF PRINCIPAL CAMPAIG	N COMMITTEE			
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 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)				
(b) Address (number and street) WHY IN IRE 4 PRESIDE INT				
17748 KINIGHTS DRIVE				
(c) City, State, and ZIP Code				
CASTROVALLEY CA 9454	52			
DESIGNATION OF OTHER AUTHORIZED	COMMITTEES			
(Including Joint Fundraising Representat	ives)			
<ol> <li>I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.</li> </ol>				
NOTE: This designation should be filed with the principal campaign committee.				
(a) Name of Committee (in full)				
(b) Address (number and street)				
(-), 12, 13, 13, 13, 13, 13, 13, 13, 13, 13, 13				
(a) City State and 7ID Code				
(c) City, State, and ZIP Code				
	·			
DECLARATION OF INTENT TO EXPEND PERSONAL F				
I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) b	y 			
9A gintari anna in in Tahuan Dibabas in Tah Balan-Balan Shari an Arabas in	for the primary election, and			
responding to the state of the	· · · · · · · · · · · · · · · · · · ·			
and the second of the second o	ioi a p goriorar olocaora			
If you do not intend to expend personal funds exceeding the threshold amount for either election, you must enter "0.00" for each.				
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			
\$ albaer 1/23/12				
NOTE: Submission of false, ecroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.				
ES3AM39 BDE				

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING D The FEC added this page to the end of this filing to indicate ho				
Hand Delivered	Date of Receipt			
USPS First Class Mail	Postmarked			
USPS Registered/Certified	Postmarked (R/C)			
USPS Priority Mail	Postmarked			
Delivery Confirmation™ or Signature Confirmation™ Label				
USPS Express Mail	Postmarked			
Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
Next Business I	Day Delivery			
Received from House Records & Registration Office	Date of Receipt			
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	eipt or Postmarked			
4mp	1/30/12			
PRÉPARER (3/2005)	DATE PREPARED			