Image# 10932164886 FEC FORM 2 **STATEMENT OF CANDIDACY**

1. (a) Name of Candidate (in full) Joseph Heath Shuler (b) Address (number and street) PO Box 97 CC; City, State and ZIP Code Hazelwood NC 28738 3. Is This Statement NC 11 DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE 7. I hereby designate the following named political committee as my Principal Campaign Committee for the NOTE: This designation should be filed with the appropriate office listed in the instructions. (a) Name of Committee (in full) Heath Shuler for Congress (b) Address (number and street) PO Box 8446 (c) City, State and ZIP Code Asheville NC 28814 DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)							
PO Box 97 (c) City, State and ZIP Code Hazelwood NC 28738 4. Party Affiliation DEMOCRATIC PARTY DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE 7. I hereby designate the following named political committee as my Principal Campaign Committee for the NC 11 NOTE: This designation should be filed with the appropriate office listed in the instructions. (a) Name of Committee (in full) Heath Shuler for Congress (b) Address (number and street) PO Box 8446 (c) City, State and ZIP Code Asheville NC 28814 DESIGNATION OF OTHER AUTHORIZED COMMITTEES	Joseph Heath Shuler						
(c) City, State and ZIP Code Hazelwood NC 28738 3. Is This Statement (N) OR Amend (A) 4. Party Affiliation DEMOCRATIC PARTY DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE 7. I hereby designate the following named political committee as my Principal Campaign Committee for the NOTE: This designation should be filled with the appropriate office listed in the instructions. (a) Name of Committee (in full) Heath Shuler for Congress (b) Address (number and street) PO Box 8446 (c) City, State and ZIP Code Asheville NC 28814 DESIGNATION OF OTHER AUTHORIZED COMMITTEES	(b) Address (number and street)		Check if addre	ess changed	2. Identifica	tion Number	
Hazelwood NC 28738 Statement X (N) OR (A) 4. Party Affiliation DEMOCRATIC PARTY DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE 7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 (year of election) NOTE: This designation should be filed with the appropriate office listed in the instructions. (a) Name of Committee (in full) Heath Shuler for Congress (b) Address (number and street) PO Box 8446 (c) City, State and ZIP Code Asheville NC 28814 DESIGNATION OF OTHER AUTHORIZED COMMITTEES						172	
4. Party Affiliation DEMOCRATIC PARTY 5. Office Sought House 6. State & District of Candidate NC 11 DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE 7. I hereby designate the following named political committee as my Principal Campaign Committee for the NOTE: This designation should be filled with the appropriate office listed in the instructions. (a) Name of Committee (in full) Heath Shuler for Congress (b) Address (number and street) PO Box 8446 (c) City, State and ZIP Code Asheville NC 28814 DESIGNATION OF OTHER AUTHORIZED COMMITTEES						-+ X	
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(c) City, State and ZIP Code Asheville NC 28814 DESIGNATION OF OTHER AUTHORIZED COMMITTEES	(b) Address (number and street)						
Asheville NC 28814 DESIGNATION OF OTHER AUTHORIZED COMMITTEES	PO Box 8446						
DESIGNATION OF OTHER AUTHORIZED COMMITTEES	(c) City, State and ZIP Code						
	Asheville	NC	2	8814			
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my	I hereby authorize the following name					and expend fur	nds on behalf of my
candidacy.	•	a filed with the principe	l campaign comm	ittoo			
NOTE: This designation should be filed with the principal campaign committee.	NOTE.THIS designation should be	e nied with the philopa	ıı campaign comm	ntee.			
(a) Name of Committee (in full)	(a) Name of Committee (in full)						
(b) Address (number and street)	(b) Address (number and street)						
(c) City, State and ZIP 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.	I certify that I have ex	xamined this Statement	t and to the best of	f my knowledge	e and belief it i	s true, correc	ct, and complete.
Signature of Candidate Date	ignature of Candidate				Date		
J. Heath Shuler 12/30/2010	. Heath Shuler				12/30/2010	0	
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C.§4376	OTE:Submission of false, erroned	ous or incomplete inforr	mation may subjec	t the person si	gning this Stat	tement to pen	alties of 2 U.S.C.§437g.

FEC FORM 2 (REV. 02/2009)