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STATEMENT OF CANDIDACY

|                                                                                                         |                               |                                                                                 |
|---------------------------------------------------------------------------------------------------------|-------------------------------|---------------------------------------------------------------------------------|
| 1. (a) Name of Candidate (in full) <u>Paul Andrew Rundquist</u>                                         |                               |                                                                                 |
| (b) Address (number and street) <u>5 Cedar Ave</u><br><input type="checkbox"/> Check if address changed |                               | 2. Candidate's FEC Identification Number                                        |
| (c) City, State, and ZIP Code <u>Gaithersburg, MD, 20877</u>                                            |                               | 3. Is This Statement <input checked="" type="checkbox"/> New (N) OR Amended (A) |
| 4. Party Affiliation <u>DEMOCRAT</u>                                                                    | 5. Office Sought <u>House</u> | 6. State & District of Candidate <u>MD 02</u>                                   |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 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) <u>Citizens for Paul Rundquist</u>         |
| (b) Address (number and street) <u>5 Cedar Ave, Gaithersburg, MD 20877</u> |
| (c) City, State, and ZIP Code <u>Gaithersburg MD 20877</u>                 |

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 <u>[Signature]</u> | Date <u>3/5/2014</u> |
|-------------------------------------------|----------------------|

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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