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FEC FORM 2 STATEMENT OF CANDIDACY

FEC MAIL CENTER

2017 NFC -7 PM 1. (a) Name of Candidate (in full) Dr. Christopher Peters (b) Address (number and street) ☐ Check if address changed 2. FEC Candidate Identification Number 1995 Ashlynd Drive H6IA02161 3. Is This New Amended (c) City, State, and ZIP Code Statement (N) OR X (A) Coralville, IA 52241 4. Party Affiliation 5. Office Sought 6. State & District of Candidate House JA-02 REP **DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE** 7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election) NOTE: This designation should be filed with the appropriate office listed in the instructions. (a) Name of Committee (in full) **Peters for Congress** (b) Address (number and street) PO Box 2202 (c) City, State, and ZIP Code Iowa City, IA 52244 **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) Christopher Peters for Congress (b) Address (number and street) PO Box 2202 (c) City, State, and ZIP Code lowa City, IA 52244 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 12.06.2017 ARTANER PETER NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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af	12/7/2017
PREPARER	DATE PREPARED

PREPARER (3/2015)