

FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Joan Buchanan			2. Identification Number HOCA10099	
(b) Address (number and street) 555 Capitol Mall, Suite 1425		<input type="checkbox"/> Check if address changed		
(c) City, State and ZIP Code Sacramento CA 95814		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate CA 10		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2009 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) Joan Buchanan for Congress		
(b) Address (number and street) 555 Capitol Mall, Suite 1425		
(c) City, State and ZIP Code Sacramento CA 95814		

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 Joan Buchanan	Date 07/15/2009
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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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