

FEC FORM 2

STATEMENT OF CANDIDACY

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2014 MAY 15 AM 8:17
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1. (a) Name of Candidate (in full) Cherunda Lynn Fox		2. Candidate's FEC Identification Number
(b) Address (number and street) <input type="checkbox"/> Check if address changed 17145 Gable		
(c) City, State, and ZIP Code Detroit Mi: 48212		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation Republicans	5. Office Sought President	6. State & District of Candidate Michigan

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) Fox for President (Exploratory Committee)
(b) Address (number and street) 17145 Gable
(c) City, State, and ZIP Code Det. Mi: 48212

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 of _____ half of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Friends of Fox (Exploratory Committee)
(b) Address (number and street) 17145 Gable
(c) City, State, and ZIP Code Det. Mi: 48212

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

Cherunda L Fox

Date

5-16-14

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. 437g.

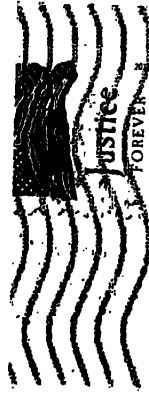
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Theranda Fox
17145 Gable
Detroit, MI 48212

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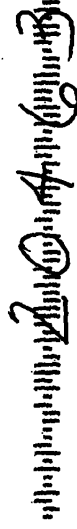


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Federal Election Commission
Attn: Presidential Candidate Division
999 E Street NW
Washington, DC

20463



Federal Election Commission
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 PREPARER
 (8/2013)

5/15/14
 DATE PREPARED

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