

**FEC FORM 2**  
**STATEMENT OF CANDIDACY**

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 2015 AUG 17 AM 8:48

1. (a) Name of Candidate (in full) <i>Peter Messina</i>			2. FEC Candidate Identification Number	
(b) Address (number and street) <i>1701 Williams Court Suite 607</i>		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code <i>Columbus GA 31904</i>		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation <i>Republican</i>	5. Office Sought <i>U.S. President</i>	6. State & District of Candidate <i>Georgia</i>		

**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)  
*The Committee to Elect Peter Messina for President of the United States*

(b) Address (number and street)  
*1701 Williams Court Suite 607*

(c) City, State, and ZIP Code  
*Columbus GA 31904*

**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 <i>Peter J. Messina</i>	Date <i>8/2/15</i>
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**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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Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


**8/17/15**  
 PREPARER DATE PREPARED  
 (3/2015)

11-10-000 1-10-11 000-10-11-11