

Image# 15951364376

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) DR Will Schroeder			2. Candidate's FEC Identification Number P60007390	
(b) Address (number and street) 185 Glen Apt 3H		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Grayslake IL 60030		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought Presidential	6. State & District of Candidate		

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) Dr Will Schroeder		
(b) Address (number and street) 185 Glen St		
(c) City, State, and ZIP Code Grayslake IL 60030		

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 Dr Will Schroeder <i>[Electronically Filed]</i>	Date 05/07/2015
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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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