FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Mr. Chase Iron Eyes								
	(b) Address (number and street) 00N02 Agency Ave. PO Box 888	☐ Check if address changed				Candidate's FEC Identification Number H6ND01015			
	(c) City, State, and ZIP Code					3. Is This N	lew	Amended	
	Fort Yates		NE	5853	8	Statement X (N	N) OR	(A)	
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	rict of Candidate			
	DEMOCRATIC PARTY	House			ND	01			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election) election(s).								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full)								
Committe to Elect Chase Iron Eyes to Congress									
	(b) Address (number and street) 1902 E. Divide Ave.								
	(c) City, State, and ZIP Code								
					ND	58501			
	Bismarck				ND	36301			
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.									
Si	gnature of Candidate					Date			
M	Ir. Chase Iron Eyes	[Electronically Filed]				04/15/2016			
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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FEC FORM 2 (REV. 02/2009)