FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	KC Matzo Balls					2 Candidata's FFO	tification Number
	(b) Address (number and street) 207 E Diehl Ave	☐ Check if address changed				Candidate's FEC Identification Number P60015583	
	(c) City, State, and ZIP Code					3. Is This New	w Amended
	Des Moines	IA 50315			5	Statement X (N)	OR (A)
4.	Party Affiliation	5. Office Soug			6. State & Dist	rict of Candidate	
	INDEPENDENT	Presidenti	al				
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)						
	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
(a) Name of Committee (in full) Misfits of Absence Kognitive Creations							
	(b) Address (number and street) 621 Des Moines St unit Z						
	(c) City, State, and ZIP Code						
	Des Moines				IA	50309	
(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						
		mined this Stat	ement and to	o the best of	my knowledge a	and belief it is true, correct a	and complete.
Signature of Candidate					Date		
C	ory Holden			[Elec	tronically Filed]	09/21/2015	
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)