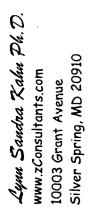
FEC FORM 2

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				_				FFR -9
. (a) Name of Candidate (in full)								***
Lynn Sandra Kahn (b) Address (number and street)	Check if address	changed	2. Identil	fication	Numb	or		<u>IC MAIL</u>
PO Box 497					NUIN			
(c) City, State, and ZIP Code Kensington MD 208		ement		New (N)	OR	(A)		
. Party Affiliation	5. Office Sought		District of Can	didate				
Independent	President	Maryl	and			·		
	DESIGNATION OF PRIN named political committee as my P			he	201	6 lection)	electior	n(s).
NOTE: This designation should i	be filed with the appropriate office	listed in the instruction	IS.	0		,		
(a) Name of Committee (in full)								
Lvnn S Kahn fo	r President 2016							
(b) Address (number and street)								
PO Box 497								
(c) City, State, and ZIP Code								
Kensington ME	J 20895-0497							
. I hereby authorize the following	DESIGNATION OF OTHE (Including Joint F named committee, which is NOT n	undraising Represent	atives)			expend	funds c	n behalf of my
candidacy.								
NOTE: This designation should	be filed with the principal campaigr	n committee.						
NOTE: This designation should (a) Name of Committee (in full)	be filed with the principal campaigr	n committee.						
	be filed with the principal campaigr	n committee.						
(a) Name of Committee (in full)		n committee.						
		n committee.						
(a) Name of Committee (in full) (b) Address (number and street)		n committee.						
(a) Name of Committee (in full)		n committee.						
(a) Name of Committee (in full) (b) Address (number and street)		n committee.			· · · · · · · · · · · · · · · · · · ·			
 (a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code 				t is true,	, corre	ect and	comple	e.
 (a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code)		ge and belief in Date	t is true	, corre	ect and	complet	e.
 (a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code)			t is true,	, corre	ect and	complet	
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code	examined this Statement and to th	e best of my knowledg	Date	کہ ر	51	15		
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code)	e best of my knowledg	Date	کہ ر	51	15		
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code	examined this Statement and to th	e best of my knowledg	Date	کہ ر	51	15		
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code	examined this Statement and to th	e best of my knowledg	Date	کہ ر	51	15	f 2 U.S	
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code (c) City, State, and ZIP Code	examined this Statement and to the	te best of my knowledg	Date	کہ ر	51	15	f 2 U.S	С. §437g. FORM 2 (REV. 12
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code	examined this Statement and to the	e best of my knowledg	Date	کہ ر	51	nalties c	f 2 U.S. FEC	С. §437g. FORM 2 (REV. 12
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code <i>I certify that I have</i> Signature of Candidate NOTE: Submission of false, erroned	examined this Statement and to the	te best of my knowledg	Date	کہ ر	51	nalties c	f 2 U.S. FEC	С. §437g. FORM 2 (REV. 12
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code (c) City, State, and City, and (c) C	examined this Statement and to th	te best of my knowledg	Date	کہ ر	51	nalties c	f 2 U.S. FEC	С. §437g. FORM 2 (REV. 12
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code (c) City, State, and City, and (c)	examined this Statement and to the	te best of my knowledg	Date	کہ ر	51	nalties c	f 2 U.S. FEC	С. §437g. FORM 2 (REV. 12
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code I certify that I have Signature of Candidate NOTE: Submission of false, erroned (c) City, State, and ZIP Code	examined this Statement and to th	y subject the person si	gning this Sta	tement	to per	nalties c	f 2 U.S.	С. §437g. FORM 2 (REV. 12



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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
	Date of Receipt
Hand Delivered	
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
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USPS Priority Mail Express	Postmarked
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Overnight Delivery Service (Specify):	Shipping Date
Next Busines	ss Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Date of F	Receipt or Postmarked
PREPARER	2/9/15 DATE PREPARED
(8/2013)	