FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full) THOMAS EDWARD MICHLER	<u> </u>						
	(b) Address (number and street)					Candidate's FEC Identification Number P60019338		
) City, State, and ZIP Code					ew Amended		
	CEDAR FALLS	IA 50613			13	Statement X (N	I) OR (A)	
4.	Party Affiliation INDEPENDENT	5. Office Soug President			6. State & Dist	rict of Candidate		
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)							
	EDucational							
	(b) Address (number and street) 105 15th ave Nw							
	(c) City, State, and ZIP Code							
	INDEPENDENCE				IA	50644		
(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 Date								
TI	HOMAS EDWARD MICHLER		[Electronically Filed]			01/25/2016		
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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