FEC FORM 2 STATEMENT OF CANDIDACY

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| 1. | (a) Name of Candidate (in full) | | | | | | | | |
|---|--|----------------------------|---------------|---------------|------------------|---|----------------|---------------|--------------------------|
| | Sven Poplin | | | | | | | | |
| | (b) Address (number and street) 530 Shane Circle | □ Check if address changed | | | | 2. Candidate's FEC Identification Number P60015062 | | | |
| | (c) City, State, and ZIP Code | | | | | 3. Is This | s I | New | Amended |
| | Winter Springs | FL 32708 | | | 8 | Staten | nent X | (N) OR | (A) |
| 4. | Party Affiliation | 5. Office Soug | ht | | 6. State & Distr | rict of Candio | date | | |
| | NPA | President | ial | | | | | | |
| | DE | SIGNATIO | N OF PR | | CAMPAIGN | | ITTEE | | |
| 7. | I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election(s). | | | | | | | | |
| | NOTE: This designation should be filed with the appropriate office listed in the instructions. | | | | | | | | |
| | (a) Name of Committee (in full) Poplin for President | | | | | | | | |
| | (b) Address (number and street) 550 Disston Ave. | | | | | | | | |
| | (c) City, State, and ZIP Code | | | | | | | | |
| | Clermont | | | | FL | 34711 | I | | |
| | | | | | | | | | |
| 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 exa | mined this Stat | tement and to | o the best of | my knowledge a | nd belief it is | s true, correc | ct and comp | lete. |
| Si | ignature of Candidate | | | | | Date | | | |
| Sven Poplin [Electronically Filed] 09/10/2015 | | | | | | | | | |
| 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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