

# FEC FORM 2

## STATEMENT OF CANDIDACY

RECEIVED  
FEC MAIL CENTER

1. (a) Name of Candidate (in full) <u>DALE M. HOINOSKI (SKIP)</u>		2016 SEP -6 AM 11:42
(b) Address (number and street) <u>P.O. Box 11</u> <input type="checkbox"/> Check if address changed		2. FEC Candidate Identification Number <u>C00566125</u>
(c) City, State, and ZIP Code <u>GREENWOOD MD 44034</u>		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
4. Party Affiliation <u>IND</u>	5. Office Sought <u>PRESIDENT</u>	6. State & District of Candidate

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 election(s).  
(year of election)
- NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)

WRITE IN HOINOSKI 2016

(b) Address (number and street)

(c) City, State, and ZIP Code

### 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)

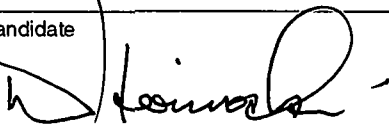
(b) Address (number and street)

(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.

Signature of Candidate

Date



30 Aug 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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FEDERAL ELECTION COMMISSION  
999 E STREET  
N.W. WASHINGTON DC  
20543

Federal Election Commission  
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS  
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
PREPARER (3/2015)	9/16/16 DATE PREPARED

20160911 09:00:00 AM