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From the Desk of:
TOM CASPERSON

4305 US 2 & 41
Cellular Number: (906) 280-1236
Email Address: tom@tomcasperson.net

November 19, 2015

Federal Election Commission
999 E Street, NW
Washington, DC 20463

RE: TOM CASPERSON, FEC FORM 2
STATEMENT OF CANDIDACY

Dear Sir or Madame:

Enclosed, for filing, is a Statement of Candidacy, which I have signed, evidencing my intention to see election to the House of Representatives for the First Congressional District for the State of Michigan.

Of course, if you should have any questions or concerns about my filing, please contact me as outlined above.

Thank you.

Sincerely,



Tom Casperson

2015-11-20 10:00 AM

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Tom Casperson		2. FEC Candidate Identification Number H8MIO1107
(b) Address (number and street) 4305 US 2 & 41	<input type="checkbox"/> Check if address changed	3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code Escanaba, Michigan 49829		
4. Party Affiliation Republican	5. Office Sought US House of Representatives	6. State & District of Candidate Michigan, First Congressional District

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) Casperson For Congress	RECEIVED FEDERAL ELECTION COMMISSION PUBLIC DISCLOSURE DIVISION 2015 NOV 20 AM 10:49
(b) Address (number and street) PO Box 499	
(c) City, State, and ZIP Code Escanaba, Michigan 49829	

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.

NA

(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 Tom Casperson 	Date November 19, 2015
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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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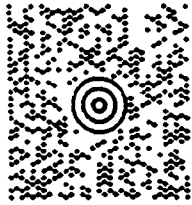
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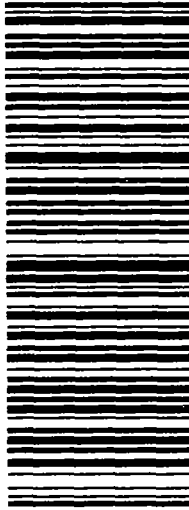
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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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 PREPARER

11/20/15
 DATE PREPARED

2015-11-20 10:00:00 AM