## FEC FORM 2 STATEMENT OF CANDIDACY

## RECEIVED FEC MAIL CENTER

1. (a) Name of Candidate (in full)	2015 AUG 26 Art 7-34	
Hick Isoak		
(b) Address (number and street)	2. FEC Candidate IdentiAcation Number	
(c) City, State, and ZIP Code	3. Is This New Amended	
Toleda, OR 97391	Statement (N) OR (A)	
4. Party AfAiation 5. OfAce Sought 6. State & Distri	ict of Candidate	
Independent President of U.S., OR = 5	th Congressional Dist.	
DEsig NaTiON Of pRiNcipal campaig N c OmmiTTEE		
7. I hereby designate the following named political committee as my Principal Campaign Comm NOTE: This designation should be Aled with the appropriate of Ace listed in the instructions.	ittee for the election(s).  (year of election)	
(a) Name of Committee (in full)		
Gick Is agk for President  (b) Address (number and street)		
655 Se 2nd 9t. Apt 6		
(c) City, State, and ZIP Code		
Toledo, OR 97391		
(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 Aled 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  When I was a second control of the control	Date 8 [19 ] [5	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.		
9-00068		
	FEC For m 2 (r Ev 02/2009)	

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Federal Election Commission 999Est. NW Washington D.C. 20510-7116

## 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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	Date of Receipt
Hand Delivered	
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Received from Senate Public Records Office	Date of Receipt
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Received from Electronic Filing Office	Date of Neceipt
,	Date of Receipt or Postmarked
Other (Specify):	- 1
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	8/26/15
PREPARER	DATE PREPARED

(3/2015)