

**FEC FORM 2**  
**STATEMENT OF CANDIDACY**

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1. (a) Name of Candidate (in full) <b>BARBARA JOY WAYMIRE</b>		
(b) Address (number and street) <input type="checkbox"/> Check if address changed <b>2710 COUNTRY ROAD 202</b>		2. FEC Candidate Identification Number <b>999361</b>
(c) City, State, and ZIP Code <b>TULSAKE, CA 96134</b>		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
4. Party Affiliation <b>LIBERTARIAN</b>	5. Office Sought <b>PRESIDENT</b>	6. State & District of Candidate <b>CA</b>

**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) <b>WAYMIRE 2016</b>
(b) Address (number and street) <b>2710 COUNTRY ROAD 202</b>
(c) City, State, and ZIP Code <b>TULSAKE, CA 96134</b>

**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.

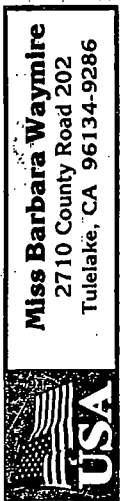
(a) Name of Committee (in full)
(b) Address (number and street)
(c) City, State, and ZIP Code

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 <b>Barbara Joy Waymire</b>	Date <b>10/5/15</b>
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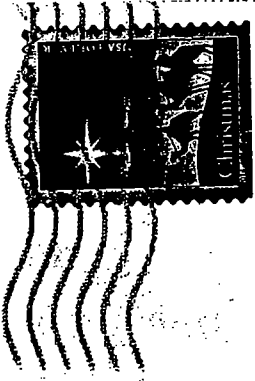
**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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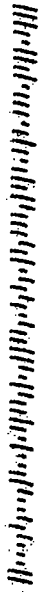
(Amended Form 2)

**Miss Barbara Waymire**  
2710 County Road 202  
Tulelake, CA 96134-9286

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Federal Election Commission  
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 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
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked <u>10/5</u> Date of Receipt <u>10/13</u>
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<input type="checkbox"/> USPS Priority Mail	Postmarked
<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
Next Business Day Delivery	<input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

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 (3/2015)

10/13  
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