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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Ian Gabriel Rodriguez	☐ Check if address changed				2. Candidate's FEC Identification Number			
	(b) Address (number and street) 2636 Woods Edge Circle		леск п адаге	ess change	1	P60021961	nullcation number		
	(c) City, State, and ZIP Code					3. Is This N	ew Amended		
	Orlando	FL 32817			17	Statement X (N	I) OR (A)		
4.	Party Affiliation	5. Office Soug			6. State & Dist	rict of Candidate			
_	W	President	ıaı						
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full)								
	'Cause I'm not Trump								
	(b) Address (number and street) 2636 Woods Edge Circle								
	(c) City, State, and ZIP Code								
	Orlando				FL	32817			
	DE	SIGNATIO	N OF OT	HER AL	JTHORIZED	COMMITTEES			
		(Including Joir	nt Fundrais	ng Representativ	es)			
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)								
	(b) rearest (names and shoot)								
(c) City, State, and ZIP Code									
	I certify that I have eva	mined this Stat	tement and to	n the heet o	f my knowledge a	and helief it is true correct	and complete		
	gnature of Candidate on Gabriel Rodriguez								
Iu	n Gabriei Roariguez			[Ele	ctronically Filed]	06/29/2016			
NO	OTE: Submission of false, erroneous,	ignate the following named political committee as my Principal Campaign Committee for the 2016 (year of election) designation should be filed with the appropriate office listed in the instructions. Committee (in full) See I'm not Trump (number and street) oods Edge Circle a, and ZIP Code (noluding Joint Fundraising Representatives) DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) norize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my designation should be filed with the principal campaign committee. Committee (in full) (number and street) a, 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.							

FEC FORM 2 (REV. 02/2009)