FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Mr. Todd LaVern Hudson							
	(b) Address (number and street) 5005 Cookes Lane	☐ Check if address changed				2. Candidate's FEC Identification Number P60022142		
	(c) City, State, and ZIP Code					3. Is This N	ew Amended	
	Doylestown	PA 18902)2	Statement X (N	I) OR (A)	
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	rict of Candidate		
	INDEPENDENT	President	ial					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
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)							
	Restore America							
	(b) Address (number and street) 5005 Cookes Lane							
	(c) City, State, and ZIP Code							
					PA	18902		
	Doylestown				17	10902		
(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.								
Si	Signature of Candidate Date							
	odd LaVern Hudson							
10	ad Levern Hadson			[Elec	tronically Filed]	07/14/2016		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								

FEC FORM 2 (REV. 02/2009)