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FEC FORM 2

STATEMENT OF CANDIDACY

1							
٠.	(a) Name of Candidate (in full)						
	STEPHENSON, NEIL, KIERN						
	(b) Address (number and street) 500 E MONROE ST Apt 213	☐ Check if address changed			2. Candidate's FEC Identification Number P00016014		
	(c) City, State, and ZIP Code					ew Amended	
	DUNDEE		MI 4	8131	Statement X (N	I) OR (A)	
4.	Party Affiliation	5. Office Sought		6. State & Dist	rict of Candidate		
	GREEN PARTY	Presidential			00		
	DE	SIGNATION OF	PRINCIP	AL CAMPAIGN	N COMMITTEE		
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)						
	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
	(a) Name of Committee (in full)						
	V campaign for Pres	sident					
	(b) Address (number and street)						
	500 E MONROE ST Apt 213						
	(c) City, State, and ZIP Code						
	DUNDEE			MI	48131		
	DE	SIGNATION OF	OTHER A	AUTHORIZED	COMMITTEES		
			_	aising Representativ			
8.	I hereby authorize the following nan candidacy.	ed committee, which is	NOT my pri	ncipal campaign con	nmittee, to receive and ex	pend funds on behalf of my	
NOTE: This designation should be filed with the principal campaign committee.							
_	(a) Name of Committee (in full)						
	(-)						
	(I-) A d d (
	(b) Address (number and street)						
	(b) Address (number and street)						
	(b) Address (number and street) (c) City, State, and ZIP Code						
	(c) City, State, and ZIP Code	mined this Statement a	and to the hea	st of my knowledge a	and haliaf it is true correct	and complete	
	(c) City, State, and ZIP Code I certify that I have example 1.	mined this Statement ar	nd to the bes	st of my knowledge a	and belief it is true, correct	and complete.	
	(c) City, State, and ZIP Code I certify that I have exactignature of Candidate	mined this Statement ar	nd to the bes	st of my knowledge a	and belief it is true, correct	and complete.	
	(c) City, State, and ZIP Code I certify that I have example 1.	mined this Statement ar		st of my knowledge a Electronically Filed]		and complete.	
	(c) City, State, and ZIP Code I certify that I have exactignature of Candidate	mined this Statement ar			Date	and complete.	
S	(c) City, State, and ZIP Code I certify that I have exactignature of Candidate		[.	Electronically Filed]	Date 05/06/2020		
S	(c) City, State, and ZIP Code I certify that I have exaignature of Candidate TEPHENSON, NEIL, , ,		[.	Electronically Filed]	Date 05/06/2020		
S	(c) City, State, and ZIP Code I certify that I have exaignature of Candidate TEPHENSON, NEIL, , ,		[.	Electronically Filed]	Date 05/06/2020		

FEC FORM 2 (REV. 02/2009)