

# FEC FORM 2

## STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) <u>Esther Jane Watrous</u>		2. FEC Candidate Identification Number
(b) Address (number and street) <input type="checkbox"/> Check if address changed <u>4055 W. Michigan Ave Apt 114</u>		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code <u>Saginaw MI 48638</u>		
4. Party Affiliation <u>Ind</u>	5. Office Sought <u>President</u>	6. State & District of Candidate <u>MI - District 5</u>

### 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) <u>Committee to elect Esther Watrous president in 2016</u>
(b) Address (number and street) <u>4055 W. Michigan Ave Apt 114</u>
(c) City, State, and ZIP Code <u>Saginaw MI 48623</u>

### 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 <u>Esther J Watrous</u>	Date <u>2/18/16</u>
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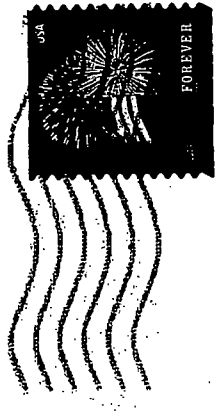
**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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NON-PROFIT ORGANIZATION

E. Watrous  
4055 W. Michigan Ave  
#114  
Saginaw, MI 48638

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METROPLEX MI 480  
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