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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Chad Christopher Kline					1	
	(b) Address (number and street) 1367 Laveta trerrace	☐ Check if address changed				Candidate's FEC Identification Number P60006798	
	(c) City, State, and ZIP Code					3. Is This New Amended	
	Los angeles		CA	90020	6	Statement X (N) OR (A)	
4.	Party Affiliation	5. Office Sought			6. State & Dist	trict of Candidate	
	W	Presidential					
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) Chad Kline for President							
	(b) Address (number and street) 1367 Laveta trerrace						
	(c) City, State, and ZIP Code						
	Los angeles				CA	90026	
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 eva	mined this Stateme	ent and to	the hest of i	my knowledge a	and helief it is true, correct and complete	
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.							
	gnature of Candidate					Date	
<i>Ci</i>	had Christopher Kline			[Elect	ronically Filed]	04/15/2015	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.							
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