FEC FORM 2 STATEMENT OF CANDIDACY

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	candidacy. NOTE: This designation should be (a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code (c) City, State, and ZIP Code I certify that I have exa ignature of Candidate Dr. Gene Ray OTE: Submission of false, erroneous	filed with the prin	cipal campaig	n committe	ee. my knowledge a tronically Filed]	Date 10/07/20	s true, correc 115	t and comp	lete.	
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0.	candidacy	neu commuce, v	which is NOT	my principa	al campaign com	nmittee, to re	eceive and ex	xpend funds	s on behalf of my	
8	I hereby authorize the following nar	ned committee v								
	DE				THORIZED g Representative		TEES			
	Lenexa				KS	66227				
	(c) City, State, and ZIP Code				140	0000	-			
	24505 Prairie Star Parkway									
	(b) Address (number and street)									
	Time Cube for Ame	rica 2016								
	(a) Name of Committee (in full)									
1.	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
7	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 election(s).									
_							ITTEE			
	Party Affiliation OTHER	5. Office Sough Presidentia			6. State & Dist	rict of Candi	date			
4.	St. Petersburg	5 055 - 0	FL	3374		Stater		N) OR	(A)	
4.	(c) City, State, and ZIP Code					3. Is Thi	~ /	lew	Amended	
4.	P.O. Box 40302		eck if address	s changed		2. Candida P6001	ate's FEC Ide 6599	entification I	Number	
4.	(b) Address (number and street)									
4.	Dr. Gene Ray (b) Address (number and street)									