

Image# 201511049003284584

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Brad Schiller Dr.			2. Candidate's FEC Identification Number P60017589		
(b) Address (number and street) P.O. box 1831		<input type="checkbox"/> Check if address changed			
(c) City, State, and ZIP Code zephyr Cove		NV 89448	3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation INDEPENDENT	5. Office Sought Presidential		6. State & District of Candidate		

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) Voters for Schiller		
(b) Address (number and street) 1308 Highway 50		
(c) City, State, and ZIP Code zephyr cove NV 89448		

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 Brad Schiller <i>[Electronically Filed]</i>	Date 11/04/2015
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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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