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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Nelson Jerome Cannon						
	(b) Address (number and street) 8656 Hwy M-66	☐ Check if address changed			Candidate's FEC Identification Number H6MI01218		
	(c) City, State, and ZIP Code					lew Amended	
	Fife Lake		MI 496	333	Statement X (I	N) OR (A)	
4.	Party Affiliation	5. Office Sought		6. State & Dist	rict of Candidate		
	DEMOCRATIC PARTY	House		MI	01		
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)						
	Cannon for Congres	SS					
	(b) Address (number and street) PO Box 1637						
	(c) City, State, and ZIP Code						
	Traverse City			MI	49684		
(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 exa	mined this Statement and	d to the best	of my knowledge a	and belief it is true, correc	t and complete.	
Signature of Candidate Date							
N	elson Jerome Cannon		[El	ectronically Filed]	08/31/2015		
N	OTE: Submission of false, erroneous,	or incomplete informatio	n may subjed	t the person signir	ng this Statement to pena	alties of 2 U.S.C. §437g.	
NO	OTE: Submission of false, erroneous,	or incomplete informatio	n may subjec	t the person signir	ng this Statement to pena	alties of 2 U.S.C. §437g.	

FEC FORM 2 (REV. 02/2009)