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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Austin Cox						
	(b) Address (number and street) 1010 Coachlight Rd	☐ Check if address changed				Candidate's FEC Identification Number P60012291	
	(c) City, State, and ZIP Code					3. Is This New Amended	
	O'Fallon		IL	6226	9	Statement (N) OR (A)	
4.	Party Affiliation	5. Office Sought	t		6. State & Dist	rict of Candidate	
	INDEPENDENT	Presidential					
	DE	SIGNATION	OF PR	INCIPAL	CAMPAIGI	N 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)						
	Austin Cox for Presi	dent					
	(b) Address (number and street) 1010 Coachlight Rd						
	(c) City, State, and ZIP Code						
	O'Fallon				IL	62269	
	0.1 4.1.0.1						
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)							
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	(b) Address (number and street)						
	(c) City, State, and ZIP Code						
	I certify that I have exa	mined this Stater	ment and to	the best of	my knowledge a	and belief it is true, correct and complete.	
Si	gnature of Candidate					Date	
Ai	ustin Cox			[Flec	tronically Filed]	08/24/2015	
				Elice	romeany 1 may		
NO	OTE: Submission of false, erroneous	or incomplete in	formation n	nay subject t	he person signii	ng this Statement to penalties of 2 U.S.C. §437g.	
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FEC FORM 2 (REV. 02/2009)