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FEC FORM 2

STATEMENT OF CANDIDACY

_	() 11 (6 (11) (6 (11)					
1.	(a) Name of Candidate (in full)					
	jason michael flowers					
	(b) Address (number and street) 317 Main st	☐ Check if address changed			Candidate's FEC Identification Number P60018199	
	(c) City, State, and ZIP Code					3. Is This New Amended
	east tawas		MI	48730)	Statement X (N) OR (A)
4.	Party Affiliation	5. Office Sought			6. State & Dist	rict of Candidate
	INDEPENDENT	Presidential				
	DE	SIGNATION C	F PRINC	IPAL	CAMPAIGN	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)					
	none					
	(b) Address (number and street)					
	317 Main st					
	(c) City, State, and ZIP Code					
	East Tawas				MI	48730
_						
	DE	SIGNATION O	F OTHE	R AU1	HORIZED	COMMITTEES
		(Includ	ling Joint Fu	ndraisin	g Representativ	es)
0	I have by a vide aring the fall avviger war		h in NOT may			amittae to receive and average funds on behalf of my
0.	candidacy.	ied committee, whic	II IS NOT IIIy	/ ринсіра	ıı campaign con	nmittee, to receive and expend funds on behalf of my
	NOTE: This designation should be f	iled with the principa	l campaign	committe	ee.	
	(-) NI					
	(a) Name of Committee (in full)					
	(b) Address (number and street)					
_	(c) City State and ZIP Code					
	(c) City, State, and ZIP Code					
	(c) City, State, and ZIP Code					
		mined this Statemer	nt and to the	best of ı	ny knowledge a	nd belief it is true, correct and complete.
Si	I certify that I have exa	mined this Statemer	nt and to the	best of r	ny knowledge a	
	I certify that I have exa	mined this Statemer	nt and to the			Date
	I certify that I have exa	mined this Statemer	nt and to the		ny knowledge a ronically Filed]	
	I certify that I have exa	mined this Statemer	nt and to the			Date
Ja	I certify that I have exa gnature of Candidate ason Michael Flowers			[Elect	ronically Filed]	Date
Ja	I certify that I have exa gnature of Candidate ason Michael Flowers			[Elect	ronically Filed]	Date 11/29/2015
Ja	I certify that I have exa gnature of Candidate ason Michael Flowers			[Elect	ronically Filed]	Date 11/29/2015

FEC FORM 2 (REV. 02/2009)