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FEC FORM 2

STATEMENT OF CANDIDACY

| 1. | (a) Name of Candidate (in full) | | | | | | | | | | | | |
|---|---|----------------------------|-----|--|-------|-----------------|---|------------|-------|----|---|---------|--|
| | Nicole Mariam Heydari | | | | 100 " | === | N 1 1 11 11 11 11 11 11 11 11 11 11 11 1 | | | | | | |
| | (b) Address (number and street) 625 Monroe St | ☐ Check if address changed | | | | | Candidate's FEC Identification Number P60016417 | | | | | | |
| | (c) City, State, and ZIP Code | Code | | | | | 3. Is Th | | New | | | Amended | |
| | Washington | DC 20017 | | | | | | ment X | · (N) | OR | Ш | (A) | |
| 4. | Party Affiliation | 5. Office Soug | | | | 6. State & Dist | trict of Cano | idate | | | | | |
| | INDEPENDENT | President | ial | | | | | | | | | | |
| | DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE | | | | | | | | | | | | |
| 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) | | | | | | | | | | | | |
| | Nicole Heydari 2016 Presidential Campaign Committee | | | | | | | | | | | | |
| | (b) Address (number and street) | | | | | | | | | | | | |
| | 2010 Corporate Ridge | | | | | | | | | | | | |
| | Suite 700 (c) City, State, and ZIP Code | | | | | | | | | | | | |
| | | | | | | 1/4 | 0046 | | | | | | |
| | McLean | | | | | VA | 2210 | 12 | | | | | |
| 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 | | | | | | | | | | | | | |
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| _ | | | | | | | | | | | | | |
| 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 Date | | | | | | | | | | | | | |
| N | cole Heydari | [Electronically Filed] | | | | | | 10/03/2015 | | | | | |
| | | | | | | | | | | | | | |
| NO | 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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FEC FORM 2 (REV. 02/2009)