Image# 201511239004109617 PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

| 1. | (a) Name of Candidate (in full) | | | | | | | | | | | | | |
|--|---|---------------------------|---|------|---------|------------------|------------|---------|-----|-----|----|---|---------|--|
| | ALBERT HOWARD (b) Address (number and street) 1565 E 21st Street | | Candidate's FEC Identification Number P80004617 | | | | | | | | | | | |
| _ | (c) City, State, and ZIP Code | City, State, and ZIP Code | | | | | 3. Is | | | New | | _ | Amended | |
| | | Los Angeles CA 90011 | | | | | | tement | ~ / | (N) | OR | | (A) | |
| 4. | Party Affiliation | 5. Office Soug | jht | | | 6. State & Dist | rict of Ca | ndidate | _ | | | _ | | |
| | REPUBLICAN PARTY | President | ial | | | | | | | | | | | |
| | DE | SIGNATIO | N OF PR | INCI | PAL | CAMPAIGN | N COM | MITTI | EE | | | | | |
| 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) ALBERT HOWARD FOR U.S. PRESIDENT 2016 | | | | | | | | | | | | | |
| | (b) Address (number and street) 1565 E 21ST STREET | | | | | | | | | | | | | |
| | (c) City, State, and ZIP Code | | | | | | | | | | | | | |
| | LOS ANGELES | | | | | CA | 90 | 011 | | | | | | |
| 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 condidate: | | | | | | | | | | | | | | |
| candidacy. NOTE: This designation should be filed with the principal campaign committee. | | | | | | | | | | | | | | |
| _ | (a) Name of Committee (in full) | | | | | | | | | | | | | |
| | (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 | | | | | | | Date | | | | | | | |
| Ai | lbert Howard | | | | [Electi | ronically Filed] | 11/23 | /2015 | | | | | | |
| NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g. | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| \Box | | | | | | | | | | | | | | |

FEC FORM 2 (REV. 02/2009)