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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	James Franklin Goss					2 Candidate's EEC Identification Number		
	(b) Address (number and street) 29 Twin Oaks Village	☐ Check if address changed				Candidate's FEC Identification Number P60022126		
_	(c) City, State, and ZIP Code					3. Is This N	ew Amended	
	Mansfield		MA	0204	8	Statement X (N	I) OR (A)	
4.	Party Affiliation	5. Office Sough			6. State & Dist	rict of Candidate		
	INDEPENDENT	Presidentia	al					
	DE	SIGNATIO	N OF PR	INCIPAL	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 f	iled with the app	propriate office	ce listed in t	he instructions.			
	(a) Name of Committee (in full)							
	James F. Goss for F	resident						
	(b) Address (number and street)							
	29 Twin Oaks Village							
	(c) City, State, and ZIP Code							
	Mansfield				MA	02048		
	DE	SIGNATION	N OF OTI	HER AU	THORIZED	COMMITTEES		
				_	g Representative			
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 f	led with the prin	ncipal campa	ign committ	ee.			
(a) Name of Committee (in full)								
	(b) Address (number and street)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, , ,		, , ,	11 11 611 1		
		mined this State	ement and to	tne best of	my knowledge a	nd belief it is true, correct	ana complete.	
	gnature of Candidate					Date		
Ja	umes Franklin Goss			[Elec	tronically Filed]	07/13/2016		
NO	OTE: Submission of false, erroneous,	or incomplete in	nformation m	nay subject t	he person signir	ng this Statement to penal	ties of 2 U.S.C. §437g.	
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