PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	Wells, Kasey, , ,					0.06::-4::-4 +	ele EEO I-I	Alfination A	li imala a r	_	
	(b) Address (number and street) 120 S. Vine St.	☐ Check if address changed				Candidate's FEC Identification Number P00007864					
	(c) City, State, and ZIP Code	, State, and ZIP Code				3. Is This	Ne		Amended		
	Lexington	IL 61753			Stateme	ent X (N) OR	(A)			
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	trict of Candida	ate				
	INDEPENDENT	Presidenti	al			00					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 election(s). (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
(a) Name of Committee (in full) KASEY WELLS FOR PRESIDENT											
(b) Address (number and street) 120 S. Vine St.											
-	(c) City, State, and ZIP Code									_	
	Lexington				IL	61753					
	Lexington					000					
(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											
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.											
Si	gnature of Candidate				Date						
W	Tells, Kasey, , ,	[Electronically Filed]				06/23/2018					
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)