FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)
   Michael Andrew Maturen

   (b) Address (number and street)  
   3296 E. Clemens Rd.
   □ Check if address changed

   (c) City, State, and ZIP Code
   Harrisville   MI   48740

2. Candidate’s FEC Identification Number
   P60022787

3. Is This Statement  □ New  OR  □ Amended
   (N)  (A)

4. Party Affiliation
   OTHER

5. Office Sought
   Presidential

6. State & District of Candidate

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 election(s).

   NOTE: This designation should be filed with the appropriate office listed in the instructions.

   (a) Name of Committee (in full)
   Maturen For President

   (b) Address (number and street)
   3296 E. Clemens Rd.

   (c) City, State, and ZIP Code
   Harrisville   MI   48740

DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(包括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.

Signature of Candidate
Michael Andrew Maturen

Date
[Electronically Filed] 08/22/2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.