

FEC FORM 2

STATEMENT OF CANDIDACY

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2016 FEB-2 AM 6:55

1. (a) Name of Candidate (in full) Michael Wager		2. FEC Candidate Identification Number C00538637	
(b) Address (number and street) P.O. Box 779		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)	
(c) City, State, and ZIP Code Chagrin Falls, OH 44022		4. Party Affiliation DEM	
5. Office Sought House		6. State & District of Candidate OH 14	

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) Citizens for Michael Wager
(b) Address (number and street) P.O. Box 779
(c) City, State, and ZIP Code Chagrin Falls, OH 44022

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

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 <i>Michael Wager</i>	Date 1/20/16
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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MICHAEL WAGER
FOR CONGRESS

P.O. Box 779 ★ Chagrin Falls, Ohio 44022

Federal Election Commission
999 E Street, NW
Washington, DC. 20463

2016 FEB - 2 AM 6:55

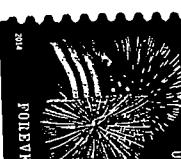
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Paid for by Citizens for Michael Wager



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ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The FEC added this page to the end of this filing to indicate how it was received.

	Date of Receipt
<input type="checkbox"/> Hand Delivered	
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked NONE
<input type="checkbox"/> USPS Registered/Certified	Date of Receipt 2/2/16
<input type="checkbox"/> USPS Priority Mail	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input checked="" type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
PREPARER (3/2015)	2/2/16 DATE PREPARED