

FEC FORM 2

STATEMENT OF CANDIDACY

RECEIVED
FEC MAIL CENTER
2017 FEB 28 AM 8:08

1. (a) Name of Candidate (in full) Franklin James Erwin		2. FEC Candidate Identification Number C00582197
(b) Address (number and street) <input type="checkbox"/> Check if address changed 108 N. Carter St		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code Cory IN 46035		
4. Party Affiliation Independent	5. Office Sought President of United States	6. State & District of Candidate Indiana

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

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)
Erwin For President

(b) Address (number and street)
108 North Carter Street

(c) City, State, and ZIP Code
Cory Indiana 46035

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)
N/A

(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 Feb. 21, 2017
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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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NON-CONFIDENTIAL

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

2017-02-28 00:44:00

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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input 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
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER *MP* *2/28/2017*
 (3/2015) DATE PREPARED