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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Chrono Gelade				0.0 11111 55011	UC C NI I		
	(b) Address (number and street) 106 East King Street	☐ Check if address changed				Candidate's FEC Identification Number P60013729		
	(c) City, State, and ZIP Code						ew Amended	
	East Helena	MT 59635			35	Statement X (N	I) OR (A)	
4.	Party Affiliation	5. Office Soug			6. State & Dist	rict of Candidate		
	INDEPENDENT	Presidenti	ial					
DESIGNATION OF PRINCIPAL 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 filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full)							
Chrono Gelade For President								
	(b) Address (number and street) 106 East King Street							
	(c) City, State, and ZIP Code							
	East Helena				MT	59635		
(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.								
					Date			
Ci	hrono Gelade	[Electronically Filed]				08/28/2015		
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)