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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Michael William Fiedler MD		
(b) Address (number and street) 848 N Rainbow Blvd 696		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Las Vegas NV 89107		2. Candidate's FEC Identification Number P60015377
4. Party Affiliation INDEPENDENT		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
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).
(year of election)

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

(a) Name of Committee (in full) Michael Fiedler for the Final President		
(b) Address (number and street) 2038 N Cahuenga Blvd		
(c) City, State, and ZIP Code Hollywood CA 90068		

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 Michael William Fiedler MD [Electronically Filed]	Date 09/16/2015
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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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