## FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full)				
mr emanuel dclaiborne hamn	nond none			
(b) Address (number and street) 121 tucker st po box 73	□ Check if addr	ess changed		2. Candidate's FEC Identification Number P60019981
(c) City, State, and ZIP Code				3. Is This New Amended
watson		R 7167		Statement X (N) OR (A)
4. Party Affiliation	5. Office Sought		6. State & Distri	ict of Candidate
AMERICAN INDEPENDENT PA	Presidential			
D	ESIGNATION OF PF	RINCIPAL	CAMPAIGN	
7. I hereby designate the following na				hittee for the 2016 (year of election) election(s).
NOTE: This designation should be	filed with the appropriate of	fice listed in th	ne instructions.	
(a) Name of Committee (in full)				
emanuel dclaicorne	e hammond			
(b) Address (number and street) 121 tucker st				
po box 73				
(c) City, State, and ZIP Code				
watson			AR	71674
D	ESIGNATION OF OT (Including Jo	_	<b>FHORIZED</b>	
<ol> <li>I hereby authorize the following na candidacy.</li> </ol>	med committee, which is NO	OT my principa	al campaign com	mittee, to receive and expend funds on behalf of my
NOTE: This designation should be	filed with the principal camp	baign committe	e.	
(a) Name of Committee (in full)				
(b) Address (number and street)				
(c) City, State, and ZIP Code				
l certify that I have ex	amined this Statement and	to the best of i	my knowledge ar	nd belief it is true, correct and complete.
Signature of Candidate				
Signature of Candidate				Date
mr emanul dclaiborne hammond none		[Elect	ronically Filed]	Date 02/23/2016
mr emanul dclaiborne hammond none	s, or incomplete information			
mr emanul dclaiborne hammond none	s, or incomplete information			02/23/2016
mr emanul dclaiborne hammond none	s, or incomplete information			02/23/2016