FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Alpha Lawrence Robert Kaufhold Omega							
	b) Address (number and street)				Candidate's FEC Identification Number P60020732			
	(c) City, State, and ZIP Code					3. Is This N	ew Amended	
	Bloomington		MN	J 5543	1	Statement X (N	N) OR (A)	
4.	Party Affiliation	5. Office Soug	ght		6. State & Dist	rict of Candidate		
	UNKNOWN	President	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)							
	Lawrence Kkaufhold							
	(b) Address (number and street) 8100 Knox Ave S. 1014							
	(c) City, State, and ZIP Code							
	., .,				MANI	EE 424		
	Bloomington				MN	55431		
(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.								
Si	gnature of Candidate					Date		
Alpha Lawrence Robert Kaufhold Omega [Electronically Fig. 2015]					tronically Filed]	03/25/2016		
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)