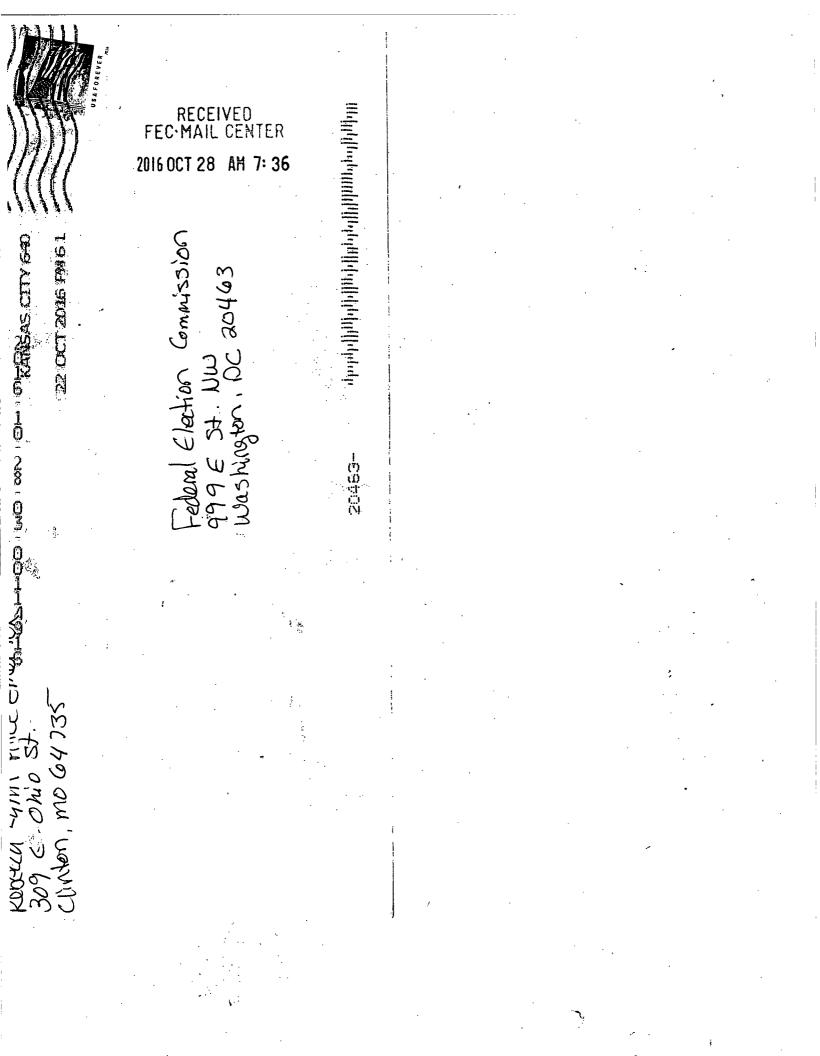
FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) Reperge Luon Pfleiderer - Change Name to Reperce
(b) Address (number and street) Check if address changed 2. Candidate's FEC Identification Number CUTIN
(c) City, State, and ZIP Code (N) OR (A) COLOR (N) OR (A) COLOR (N)
4. Party Attiliation 5. Office Sought 6. State & District of Candidate Froependent Freshoust 6. State & District of Candidate
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE
(year of election)
NOTE: This designation should be filed with the appropriate office listed in the instructions.
(a) Name of Committee (in full)
(b) Address (number and street)
(c) City. State, and ZIP Code
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 Candidates Date
1/11/10/13/16
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.
FEC FORM 2 (REV. 02/2009)



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. Date of Receipt Hand Delivered Postmarked Date of Receipt **USPS First Class Mail** 10/22/16 10/28 Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS** Priority Mail Express Postmark Illegible No Postmark Shipping Date **Overnight Delivery Service (Specify):** Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt **Received from Senate Public Records Office** Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

DATE PREPARED

PREPARER (3/2015)