

FEC FORM 2

STATEMENT OF CANDIDACY

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2016 NOV -2 PM 12:25

1. (a) Name of Candidate (in full) ROGER ALAN HOOVER		
(b) Address (number and street) <input type="checkbox"/> Check if address changed 1733 KEUKA RD. APT 106		2. FEC Candidate Identification Number NOT ASSIGNED YET
(c) City, State, and ZIP Code New Port Richey, FL 34655		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation American Peoples	5. Office Sought President	6. State & District of Candidate FL 12th

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the _____ 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)

(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 Candidate 	Date 10/31/2016
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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2016 NOV 02 PM 12:25

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PME 1-DAY
34680 0007
Date of sale
11/01/16
A7256 10 075423
S\$K
06 2500 \$
08282156

Scheduled Delivery
11/02/2016
12 Noon

POSTAGE DUE
2.80

Not flat rate

CUSTOMER USE ONLY
FROM: (PLEASE PRINT)

PHONE (407) 756-2109
Roger Alan Hoover
P.O. Box 385
Crystal Beach, FL 32108

PAYMENT BY ACCOUNT (if applicable)

DELIVERY OPTIONS (Customer Use Only)

SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item to the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.
Delivery Options
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*Refer to USPS.com® or local Post Office™ for availability.

TO: (PLEASE PRINT)

FEDERAL ELECTION COMMISSION
FEC 2 SUBMISSION
999 E STREET NW
WASHINGTON DC
20463

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ORIGIN (POSTAL SERVICE USE ONLY)		DELIVERY (POSTAL SERVICE USE ONLY)	
<input type="checkbox"/> 1-Day	<input type="checkbox"/> 2-Day	<input type="checkbox"/> Military	<input type="checkbox"/> DPO
PO ZIP Code 34680	Scheduled Delivery Date (MM/DD/YYYY) 11-2	Postage \$ 25.75	Insurance Fee \$
Date Accepted (MM/DD/YYYY) 11-1	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input checked="" type="checkbox"/> 12 NOON	Return Receipt Fee \$	Live Animal Transportation Fee \$
Time Accepted 9:05 AM	10:30 AM Delivery Fee \$	Total Postage & Fees \$ 25.75	
Weight 1 lbs.	Sunday/Holiday Premium Fee \$	Employee Signature	
Flat Rate ozs.	Accumulated Employee Initials RMC	Employee Signature	
DELIVERY (POSTAL SERVICE USE ONLY)		Employee Signature	
Delivery Attempt (MM/DD/YYYY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Delivery Attempt (MM/DD/YYYY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM

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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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked Date of Receipt

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked
11/1/16

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Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

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 PREPARER

11/2/16
 DATE PREPARED

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