

Image# 201508299001585981

PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Dr. Jared Michael Gastrock		
(b) Address (number and street) 1065 W 4th St Apt 2E		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Williamsport PA 17701		2. Candidate's FEC Identification Number P60013893
4. Party Affiliation W		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) The Committee For The Development And Implementation of the Best President Ever		
(b) Address (number and street) 1065 W 4th St apt 2E		
(c) City, State, and ZIP Code williamsport PA 17701		

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 Dr. Jared Michael Gastrock [Electronically Filed]	Date 08/29/2015
--	--------------------

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--