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SECRETARY OF THE SENATE

04 SEP -8 AM 9:54

FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)
THOMAS A. COBURN

(b) Address (number and street) ☐ Check if address changed
5409 Rolling Oaks

2. Identification Number
S4OK00174

(c) City, State, and ZIP Code
Muskogee, OK 74401

3. Is This Statement: New (N) OR X Amended (A)

4. Party Affiliation: REP

5. Office Sought: SENATE

6. State & District of Candidate: OK

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2004 (year of election) election(s).

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)
COBURN FOR SENATE Committee

(b) Address (number and street)
P.O. Box 877 3300 W. Okmulgee

(c) City, State, and ZIP Code
MUSKOGEE, OK 74402

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)
2004 JOINT CANDIDATE Committee II

(b) Address (number and street)
228 S. WASHINGTON ST, Ste 340

(c) City, State, and ZIP Code
ALEXANDRIA, VA 22314

DECLARATION OF INTENT TO EXPEND PERSONAL FUNDS (House or Senate Only)

8. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) by

9A NONE for the primary election, and

9B for the general election.

If you do not intend to expend personal funds exceeding the threshold amount for either election, you must enter "0.00" for each.

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: [signature]

Date: 8-20-2004

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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2. PAYMENT METHOD
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3. ATTACH LABEL (if provided)
Remove label backing and adhere over customer address block area (white area).

Coburn For Senate
P.O. Box 977
Muskogee, OK 74402

Senate Office of Public Records
232 Hart Senate Office Building
Washington, DC 20510

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EMILY J. REYNOLDS
SECRETARY

PAMELA B. GAUTH
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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_____ **UPS**
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Date of Receipt

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Date of Receipt

RD 09-08-04
Preparer **Date Prepared**

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