24021003176

SECRETARY OF THE SENATE
04 NOV 17 PM 12:01

FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)
Barbara A. Mikulski

(b) Address (number and street) ☐ Check if address changed
P.O. Box 13147

(c) City, State, and ZIP Code
Baltimore MD 21203

2. Identification Number
C00199273

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

4. Party Affiliation: Democrat

5. Office Sought: U.S. Senate

6. State & District of Candidate: Maryland

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2010 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)
Mikulski for Senate Committee, Inc.

(b) Address (number and street)
P.O. Box 13147

(c) City, State, and ZIP Code
Baltimore MD 21203

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

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

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

9A , , 0.00 for the primary election, and

9B , , 0.00 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: Barbara A. Mikulski

Date: 10-10-04

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

24021003177

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL™

7003 2260 0007 1746 1729

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22301

Barbara Mikulski

DEMOCRAT U.S. SENATE

P.O. BOX 13147/BALTIMORE, MARYLAND 21203

Office of Public Records
P.O.B. 5109
Alexandria, VA 22301-0109

RETURN RECEIPT REQUESTED

24021003178

EMILY J. REYNOLDS
SECRETARY

PAMELA B. GAVIN
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

THE PRECEDING DOCUMENT WAS:

____ **HAND DELIVERED** _____
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✓ **REGISTERED/CERTIFIED MAIL** 11-13-04
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____ **DHL**
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Postmark

____ **PRIORITY MAIL (NO CONFIRMATION)** _____
Date of Receipt

____ **FIRST CLASS MAIL** _____
Date of Receipt

____ **FAX** _____
Date of Receipt

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Date of Receipt

RD 11-17-04
Preparer **Date Prepared**

24021003179