

**FEC FORM 2
STATEMENT OF CANDIDACY**

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2006 FEB 16 A 7 45

1. (a) Name of Candidate (in full) Brian Emanuel Schatz		
(b) Address (number and street) 1731 Mott Smith Dr.		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Honolulu, Hawaii 96822		2. Identification Number 575-96-2546
4. Party Affiliation Democrat	5. Office Sought U.S. House	3. Is This Statement New (N) OR Amended (A)
6. State & District of Candidate Hawaii, District Two		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the **2006** 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) Brian Schatz for Congress
(b) Address (number and street) P.O. Box 1127
(c) City, State, and ZIP Code Kailua, HI 96734

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 	Date February 8/06
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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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Federal Election Commission
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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PREPARER
(3/2005)

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