

**FEC FORM 2
STATEMENT OF CANDIDACY**

1. (a) Name of Candidate (in full)

Barbara Lee

(b) Address (number and street)

1736 Franklin Street #500

(c) City, State and ZIP Code

Oakland

CA 94612

2. Identification Number

H8CA09060

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

4. Party Affiliation

DEMOCRATIC PARTY

5. Office Sought

House

6. State & District of Candidate

CA 09

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)

Barbara Lee for Congress

(b) Address (number and street)

1736 Franklin Street #500

(c) City, State and ZIP Code

Oakland

CA 94612

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. 400.6) 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 Lee

Date

12/17/2004

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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