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FEC FORM 2
STATEMENT OF CANDIDACY

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

(b) Address (number and street) ☐ Check if address changed
P.O. Box 3370

2. Identification Number
HBCA44034

(c) City, State, and ZIP Code
Palm Springs, CA 92263

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

4. Party Affiliation
Republican

5. Office Sought
House

6. State & District of Candidate
California-45

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the _____ 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)
Mary Bono Committee

(b) Address (number and street)
P.O. Box 3370

(c) City, State, and ZIP Code
Palm Springs, CA 92263

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. 400.3) by

9A 0.0.0 for the primary election, and

9B 0.0.0 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
Mary Bono

Date
11/6/03

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §43 7g.

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FEC FORM 2 (REV. 02/2003)