

Image# 28931174509

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) JOHN S. MCCAIN			2. Identification Number P80002801	
(b) Address (number and street) PO BOX 16118		<input type="checkbox"/> Check if address changed		
(c) City, State and ZIP Code ARLINGTON VA 22215		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Presidential	6. State & District of Candidate		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2008 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) JOHN MCCAIN 2008, INC.		
(b) Address (number and street) PO BOX 16118		
(c) City, State and ZIP Code ARLINGTON VA 22215		

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) JOHN MCCAIN 2008 GENERAL ELECTION COMPLIANCE FUND, INC		
(b) Address (number and street) PO BOX 16118		
(c) City, State and ZIP Code ARLINGTON VA 22215		

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 JOHN S. MCCAIN	Date 04/17/2008
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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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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

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)

MCCAIN VICTORY COMMITTEE (JOINT FUNDRAISING REPRESENTATIVE)

(b) Address (number and street)

228 S WASHINGTON ST STE 115

(c) City, State and ZIP Code

ALEXANDRIA

22314

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

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)

MCCAIN VICTORY 2008 (JOINT FUNDRAISING REPRESENTATIVE)

(b) Address (number and street)

228 S WASHINGTON ST STE 115

(c) City, State and ZIP Code

ALEXANDRIA

22314

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

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)

MCCAIN VICTORY CALIFORNIA (JOINT FUNDRAISING REPRESENTATIVE)

(b) Address (number and street)

228 S WASHINGTON ST STE 115

(c) City, State and ZIP Code

ALEXANDRIA

22314