25020221642

SECRETARY OF THE SENATE

05 MAY 24 PM 1:59

FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)
THOMAS R. CARPER

(b) Address (number and street) ☐ Check if address changed
600 WEST MATSON RUN PARKWAY

2. Identification Number
C00349217

(c) City, State, and ZIP Code
WILMINGTON, DE 19802

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

4. Party Affiliation
DEMOCRAT

5. Office Sought
U.S. SENATE

6. State & District of Candidate
DELAWARE

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)
CARPER FOR SENATE

(b) Address (number and street)
19 EAST COMMONS BLVD. SECOND FLOOR

(c) City, State, and ZIP Code
NEW CASTLE, DE 19720

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)
CENTRIST STATE VICTORY FUND

(b) Address (number and street)
120 MARYLAND AVENUE, N.E.

(c) City, State, and ZIP Code
WASHINGTON, DC 20002

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 for the primary election, and

9B $ 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: Thomas R. Carper

Date: 5-12-05

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

er for Senate
Box 2882
gton, DE 19805

UP THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL

7004 2890 0000 3215 7202

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19808
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05 MAY 24 PM 2:04

Secretary of the Senate
Office of Public Records
P.O. Box 5109
Alexandria, VA 22301-0109

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05 MAY 24 PM 2:04

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EMILY J. REYNOLDS
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7118
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

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PREPARER RD **DATE PREPARED** 05-24-05

25020221645