Image# 28991396006 FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name	of Candidate	(in full)												
	(Robin) Haye													
(b) Address (number and street)						ess changed	2. Identification Number							
P.O. Box								H8NC08042						
(c) City,					3. Is This	ent X	New			Amended				
Concord				NC		2802	6-	Stateme	nt 🗠	[⊥] (N)	OR		(A)	
4. Party Affil	iation	1	5. Office S	Sough	t		6. State & D	istrict of Candi	idate					
REPUBL	ICAN PARTY	'	House				NC 0	8						
		DES	SIGNAT	TION	OF PRI	NCIPAL (CAMPAIGN	COMMITT	EE					
7. I hereby de	7. I hereby designate the following named political committee as my Principal Campaign Committee for the (year of election) election(s).													
NOTE:T	his designation	n should be f	iled with t	he app	propriate of	fice listed in	the instruction	ns.		,				
(a) Name	e of Committee	e (in full)												
Haye	s for Congres	S												
(b) Addre	ess (number a	ind street)												
Post	Office Box 20	00												
(c) City,	State and ZII	P Code												
Conc	ord			NC		2	28026-							
		DES	SIGNAT	TION	OF OTH	IER AUT	HORIZED (COMMITTE	ES					
(Including Joint Fundraising Representatives)														
candidacy		-					ampaign commi nittee.	ittee, to receive	and expe	end func	ds on be	half of	my	
(a) Name	e of Committee	e (in full)												
2008	Joint Candida	ate Committe	е											
(b) Addre	ess (number a	ind street)												
228 S. Washington Street					e 115									
(c) City, S	State and ZIP	Code												
Alexa	ındria			VA		2	22314-							
							NAL FUND	S (House o	or Sen	ate O	nly)			
9. I intend to 6	expend person	ai iurios excee	urig the ti	ııreshol	u arnount (see 11 C.F.F	1. 400.9) Dy	1						
			9A	_			0.00	for the prin	nary elec	ction, a	nd			
9B If you do not intend to expend personal funds exceeding the threshold amount of the second personal funds exceeding the threshold amount of the second personal funds exceeding the threshold amount of the second personal funds exceeding the se							0.00							
ıт you do not i	· .													
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.													ete.	
Signature of Candidate								Date	Date					
Robert C. (Robin) Hayes NOTE: Submission of false, erroneous or incomplete information may subject the person sig									07/11/2008					
NOTE: Subn	nission of fals	e, erroneous	or incom	nplete i	nformation	may subje	t the person s	igning this Sta	itement t	o pena	Ities of	2 U.S	.C.§437g.	
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