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**FEC FORM 2
 STATEMENT OF CANDIDACY**

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

(b) Address (number and street) Check if address changed
50 BRANTERMILL DRIVE

(c) City, State, and ZIP Code
HENDERSON, NEVADA 89052

2. Identification Number

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

4. Party Affiliation
DEMOCRAT

5. Office Sought
U.S. HOUSE

6. State & District of Candidate
NEVADA 03

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2004 electoral year of elections.

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)

GALLAGHER FOR CONGRESS

(b) Address (number and street)
6100 ELTON AVENUE, SUITE 1000

(c) City, State, and ZIP Code
LAS VEGAS, NEVADA 89107

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Committees)

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. 400.101) by

\$0	0.00	for the primary election and
\$0	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: Thomas E. Gallagher

Date: 3/19/04

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 7 U.S.C. 8431(g).

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Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
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