

FEC FORM 2

STATEMENT OF CANDIDACY

6817

1. (a) Name of Candidate (in full)		*JOHN Glenn BARRY METCALF, SR.		
(b) Address (number and street)		<input type="checkbox"/> Check if address changed	2. Identification Number	
980 BERGEN ST. #7				
(c) City, State, and ZIP Code		3. Is This Statement		Amended (A)
BROOKLYN, NEW YORK		<input checked="" type="checkbox"/> (N) <input type="checkbox"/> OR		
4. Party Affiliation		5. Office Sought		6. State & District of Candidate
UNITED BLACK AMERICAN PARTY		THE PRESIDENCY U.S.A.		NEW YORK, DISTRICT 10

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) **COMMITTEE TO ELECT JOHN Glenn BARRY METCALF, SR. *PRESIDENT OF THE UNITED STATES USA.*
* JOHN Glenn BARRY METCALF, SR. *PRESIDENT OF THE UNITED STATES USA.

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)
*** THE HOUSE of THE LORD CHURCH % REV, DR. HERBERT DAUGHTER**

(b) Address (number and street)
% 415 Atlantic ave.

(c) City, State, and ZIP Code
BROOKLYN, NEW YORK 11217 (718) 596.1991

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

for the primary election, and

9B

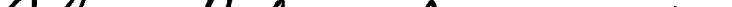
for the general election.

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

Date _____

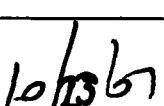
Signature of Candidate  Date 10.18.07

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

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input checked="" type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


PREPARER
(3/2005)


DATE PREPARED