

FEC FORM 2
STATEMENT OF CANDIDACY

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2006 JUN 20 A 8:12

1. (a) Name of Candidate (in full) James Richard Rinck
(b) Address (number and street) 2353 Swensberg N.E. ☐ Check if address changed
(c) City, State, and ZIP Code Grand Rapids, Michigan 49503
2. Identification Number
3. Is This Statement ☒ New (N) OR ☐ Amended (A)
4. Party Affiliation Democrat 5. Office Sought U.S. House 6. State & District of Candidate Michigan, 3rd Congressional District

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2006 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)

Citizens for Jim Rinck

(b) Address (number and street)

146 Monroe Center N.W., Suite 1108

(c) City, State, and ZIP Code

Grand Rapids Michigan 49503

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)

(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. 400.9) 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

Date

6/15/2006

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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Federal Election Commission
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