## FEC FORM 2 STATEMENT OF CANDIDACY

	. ( 0 1' - 1 - 1 -	(° - • • II)									
1. (a) Name		(in tuii)									
JD Hayworth (b) Address (number and street)								2. Identification Number			
6716 E. Duane Lane								H4AZ06052			
(c) City, State and ZIP Code						3. Is This New Statement X (N) OR (A)					
Scottsdale		1.		Z 85262	2-	10.00 t 0.00		(14)	OR	(A)	
4. Party Affili	ation CAN PARTY		5. Office Soug House	gnt		6. State & Dis	strict of Candid	ate			
TILI OBLI	0,										
		DES	SIGNATIO	N OF PRII	NCIPAL	CAMPAIGN (	COMMITTE	Ε			
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2006 (very of election)											
NOTE T	de alectros de		9 - 4 - 20 - 0		· · · · · · · · · · · · · · · · · · ·	Carlle a Caralan and Cara	()	year of election)			
NOTE: IT	ns designatio	n snould be t	lied with the a	ippropriate of	TICE IISTEC	in the instructions	S.				
(a) Name	of Committe	e (in full)									
JD H	ayworth For C	Congress									
(b) Addre	ess (number a	and street)									
14300	0 N. Northsig	ht Blvd., #105	5								
(c) City,	State and ZI	P Code									
Scotts	sdale		А	Z 85260	)-						
		DEC	NON ATIO		.ED 4113						
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)											
			,	3		5 sp	,				
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:Th	nis designatio	n should be f	iled with the p	rincipal cam	paign com	mittee.					
(a) Name	of Committe	e (in full)									
Spirit	of 94 Victory	Committee									
(b) Addre	ess (number a	and street)									
P.O.	Box 40177										
(c) City, S	State and ZIP	Code									
Washington DC 40177-											
						NAL FUNDS	6 (House or	Senate On	ıly)		
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 in	ntend to expen	ıd personal fun	ids exceeding	the threshold	amount for	either election, you	u must enter "0.	00" for each.			
	I certify th	at I have exar	nined this Sta	atement and	to the best	of my knowledge	e and belief it is	true, correct,	and co	omplete.	
Signature o	f Candidate						Date				
JD Hayworth								08/15/2006			
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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