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MS-H

700 NOV -5 A 9 06

FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20543Ronnie B. Greer
5712 Claredon Dr.
Madison, WI 53711

OCT 15 2003

Candidate ID Number: H8WIG2105

Dear Mr. Greer:

The Commission notes your submission of a Statement of Candidacy (FEC FORM 2), dated 2/1/03. However, the year of election was not provided. Please provide an amended FEC FORM 2 that includes the year of election. The FEC FORM 2 can be downloaded from the FEC website at <http://www.fec.gov>, or requested through the FEC Faxline at (202) 501-3413. (11 CFR §101.1(a))

In addition, the declaration of intent to expend personal funds in excess of the threshold was not provided. Please provide an amended FEC FORM 2 that includes this missing information. If you do not intend to expend personal funds in excess of the threshold amount, enter "\$0.00". The FEC FORM 2 can be downloaded from the FEC website at <http://www.fec.gov>, or requested through the FEC Faxline at (202) 501-3413. (11 CFR §101.1(a)) (11 CFR §400.20(b)(1) and (2)) Fax numbers and e-mail addresses are located within a committee's Statement of Organization (FEC FORM 1) and can be found on the FEC website at <http://www.fec.gov>.

Further, candidates for both the Senate and House of Representatives are required to send a copy of their Statement of Candidacy or the information required therein, including the amount by which they intend to exceed the threshold amount, to each of their opposing candidates via fax or electronic mail. (11 CFR §400.20(b)(1) and (2)) Fax numbers and e-mail addresses are located within a committee's Statement of Organization (FEC FORM 1) and can be found on the FEC website at <http://www.fec.gov>.

If you have any further questions, please contact Anne Marie Brady in the Reports Analysis Division on the toll-free number (800) 424-9530 (at the prompt press 1, then press 2 to reach the Reports Analysis Division). Her local number is (202) 694-1395.

Sincerely,

Barry J. Conway
Chief, Authorized Branch
Reports Analysis Division

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FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) **RONNIE B. GREER** 7803 NOV -5 A 03-03

(b) Address (number and street) Check if address changed
5712 CHAREDIN DRIVE

(c) City, State, and ZIP Code **MADISON, WISCONSIN 53711**

2. Identification Number **H86W102105**

3. Is Title New Amended
Statement (N) OR (A) (A)

4. Party Affiliation **Rep.** 5. Office Sought **U.S. HOUSE** 6. State & District of Candidate **WI 2ND**

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the **2004** 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) **RON GREER FOR CONGRESS**

(b) Address (number and street) **5712 CHAREDIN DRIVE**

(c) City, State, and ZIP Code **MADISON WI 53711**

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

GA **0.00** for the primary election, and

GE **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 **Ronnie B. Greer** Date **31 Oct 03**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. 5437g.

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has 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"/> First Class Mail	POSTMARKED <i>10-31-03</i>
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JMU</i>	<i>11-5-03</i>
PREPARER	DATE PREPARED