

ASST. DIR.
FEDERAL COLLECTION
COUNCIL
REPORTS ANALYSIS
DIVISION

ELECT Awww.healthcarecongressman2004.org

2004 AUG 20 12 31 45

HEALTHCARE CONGRESSMAN

STEVE LARCHUK FOR CONGRESS 2004
4TH DISTRICT, PENNSYLVANIA

SUITE #804-A 1106 OHIO RIVER BLVD., SEWICKLEY, PA. 15143
PHONE (412) 741-2427 FAX (412) 749-1884 E-MAIL LARCHUK@HEALTHCAREPARTY.ORG

FACSIMILE COVER SHEET

To: Patricia Carmona, Chief Compliance
C/O Jennifer Cinelli-Miller

Fax Number: 202-219-3496

From: Steven Larchuk

Date: 08.20.04

Pages: 3 (including cover sheet)

Re: Amended Form 2 - Candidate H4PA04099

MESSAGE:

ELECT A
HEALTHCARE
CONGRESSMAN

STEVE LARCHUK FOR CONGRESS 2004
PENNSYLVANIA 4TH DISTRICT

Federal Election Commission
Patricia Carmona
Chief, Compliance Branch
Reports Analysis Division
Washington, DC 20463

Re: Steven B. Larchuk
Candidate ID Number H4PA04099

Dear Ms. Carmona:

Per your recent request enclosed is an Amended Form 2 indicating I will not be exceeding the personal funds threshold amount.

Best regards,

Steven B. Larchuk

cc: Melissa Hart, MC
Steven Drobae



Elect a HealthCare Congressman 2004
Suite #604-A 1106 Ohio River Blvd.
Newark, Pennsylvania 15143
Phone: 412-741-2627 Fax: 412-749-1884

FROM :

FEC FORM 2

STATEMENT OF CANDIDACY

FEDERAL ELECTION
COMMISSION
REPORTS DIVISION

1. (a) Name of Candidate (in full) STEVEN B. LARCAW		2. Identification Number 114PA4099	
(b) Address (number and street) 1106 OTT RD BLDG 504A		3. Is Title Established ☐ New ☒ Amended ☐	
(c) City, State, and ZIP Code SEWICKLEY PA 15143			
4. Party Affiliation HEALTHCARE	5. Office Sought REP TO CONG	6. State & District of Candidate PA 4th	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named principal committee as my Principal Campaign Committee for the _____ starting(s)
year of election.

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

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code

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. 400.91) by

3A

0600

for the primary election, and

3B

2000

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 in the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate

Date

8/20/04

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
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	Date of Receipt
☐ USPS First Class Mail	Postmarked
☐ USPS Registered/Certified	Postmarked (R/C)
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☐ USPS Express Mail	Postmarked
☐ Postmark Illegible	
☐ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☒ Other (Specify): <i>Fax to RAD</i>	Date of Receipt or Postmarked <i>8-20-04</i>
<i>Stc</i> PREPARER	<i>8-23-04</i> DATE PREPARED