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FEC FORM 2 STATEMENT OF CANDIDACY

2005 AUG 22 A 10:19

1. (a) Name of Candidate (in full)
MICHAEL BADNARIK

(b) Address (number and street) Check if address changed
1834 TETON DRIVE

(c) City, State, and ZIP Code
GRAPEVINE, TEXAS 76051

2. Identification Number

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

4. Party Affiliation **LIBERTARIAN** 5. Office Sought **HOUSE DISTRICT 10** 6. State & District of Candidate **TEXAS - DISTRICT 10**

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)
BADNARIK FOR CONGRESS

(b) Address (number and street)
6633 HWY 290 EAST - SUITE 102

(c) City, State, and ZIP Code
AUSTIN, TEXAS 78723

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)
N/A

(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 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 **Michael Badnarik** Date **August 19, 2005**

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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