

**FEC FORM 2
STATEMENT OF CANDIDACY**

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

Melina Fox

(b) Address (number and street)

1124 South Country Club Drive

(c) City, State and ZIP Code

Greensburg IN 47240

2. Identification Number

H2IN06148

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

4. Party Affiliation

DEMOCRATIC PARTY

5. Office Sought

House

6. State & District of Candidate

IN 06

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)

FOX FOR CONGRESS

(b) Address (number and street)

PO BOX 487

(c) City, State and ZIP Code

GREENSBURG IN 47240

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. 400.6) 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

Melina Fox

Date

03/26/2004

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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