FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name	of Candidate	(in full)											
J. Christopher Chocola													
(b) Address (number and street)								2. Identification Number					
P.O. Box 6728								H2IN03111					
(c) City, State and ZIP Code South Bend				IN 46660-				3. Is This Stateme	nt X New	OR		Amended (A)	
4. Party Affil		!	5. Office S				6. State & Dis	trict of Candi	` '			(//)	
•	ICAN PARTY		House	Jougin	•		IN 02		dato				
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE												
7. I hereby designate the following named political committee as my Principal Campaign Committee for the (year of election) election(s).													
NOTE: This designation should be filed with the appropriate office listed in the instructions.													
(a) Name of Committee (in full)													
Choc	ola for Congre	ess, Inc.											
(b) Addre	ess (number a	and street)											
P.O.	Box 6728												
(c) City,	State and ZII	P Code											
South	n Bend			IN	46660	-							
DESIGNATION OF OTHER AUTHORIZED COMMITTEES													
(Including Joint Fundraising Representatives)													
 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. 													
	e of Committee												
	ornia ROMP	- (-)											
(b) Addre	ess (number a	and street)											
РО В	ox 40385												
(c) City, S	State and ZIP	Code											
Wash	nington			DC	20016	-							
							NAL FUNDS	6 (House o	or Senate (Only)			
9. I intend to 6	expend person	al tunds excee	aing the th	nreshol	a amount (s	see 11 C.F.R	. 400.9) by						
			9A	-			2100.00	for the prin	nary election,	and			
9B 2100.00								for the general election.					
If you do not in	ntend to expen	d personal fur	ds exceed	ling the	threshold a	amount for ei	ther election, yo	u 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 o	Signature of Candidate								Date				
J. Christopher Chocola								09/26/2006					
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C.§437g.													

FE3AN039 FEC FORM 2 (REV. 02/2003)