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# FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (In full) <u>Mr. Bill Jones</u>		2. Identification Number <u>540600274</u>
(b) Address (number and street) <input type="checkbox"/> Check if address changed <u>5711 N. First Avenue</u>		
(c) City, State, and ZIP Code <u>Fresno, CA 937112366</u>		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
4. Party Affiliation <u>Republican Party</u>	5. Office Sought <u>Senate</u>	6. State & District of Candidate <u>CA 6</u>

### 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) <u>Bill Jones for U.S. Senate</u>
(b) Address (number and street) <u>555 W. Shaw Avenue, Suite B-5</u>
(c) City, State, and ZIP Code <u>Fresno, CA 937042503</u>

### 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) <u>N/W 2004 Committee</u>
(b) Address (number and street) <u>P.O. Box 75103</u>
(c) City, State, and ZIP Code <u>Washington, DC 20013</u>

### 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	<input type="text" value="0.00"/>	for the primary election, and
9B	<input type="text" value="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 	Date <u>7-15-04</u>
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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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