

SECRETARY OF THE SENATE
04 AUG 18 AM 11:38FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) DORIS ROLLINS HADDOCK		2. Identification Number
(b) Address (number and street) <input type="checkbox"/> Check if address changed 295 COBB MEADOW RD., P.O. BOX 492		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code DUBLIN NH 03444		4. Party Affiliation DEMOCRAT
5. Office Sought SENATOR	6. State & District of Candidate NH	

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) HADDOCK FOR U.S. SENATE
(b) Address (number and street) 295 COBB MEADOW RD., P.O. BOX 492
(c) City, State, and ZIP Code DUBLIN NH 03444

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: **N/A**

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. 400.9) by

BA	<input type="text"/>	for the primary election, and
9B	<input type="text"/>	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 Doris R. Haddock	Date 8/10/04
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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.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Haddock For U.S. Senate
Box 492
Dublin NH 03444

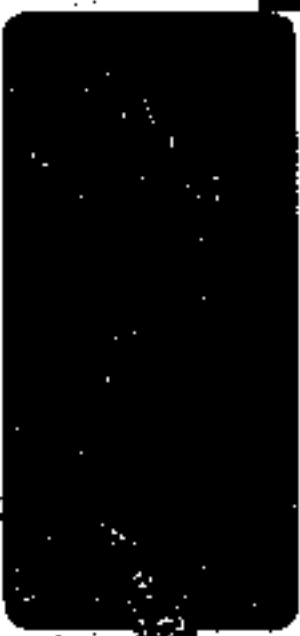
**RETURN RECEIPT
REQUESTED**

CERTIFIED MAIL™



7003 3130 0000 0630 9519

Office of Public Records
Secretary of the Senate
232 Hart Senate Office Bldg
Washington DC 20510



14410401400000000000

EMILY J. REYNOLDS
SECRETARY

PAMELA B. GAYN
SUPERINTENDENT

HAZ SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

 HAND DELIVERED

Date of Receipt



 REGISTERED/CERTIFIED MAIL

08-11-04

Postmarked

 RECEIVED FROM THE FEDERAL ELECTION
 COMMISSION

Date of Receipt

 DELIVERY CONFIRMATION/ON LINE TRACKING SYSTEM
 PRIORITY MAIL /WITH CONFIRMATION SHEET
 EXPRESS MAIL
 FEDERAL EXPRESS
 UPS
 AIRBORNE EXPRESS

Postmark

 PRIORITY MAIL, (NO CONFIRMATION)

Date of Receipt

 FIRST CLASS MAIL

Date of Receipt

 FAX

Date of Receipt

 NO POSTMARK POSTMARK ILLEGIBLE

 OTHER

Date of Receipt

RD

Prepared

08-18-04

Date Prepared

