

**STATEMENT OF CANDIDACY** 2002 JAN -9 A 10: 21  
(see reverse side for instructions)

|   |                                       |  |
|---|---------------------------------------|--|
| 1. (a) Name of Candidate (in full)<br><b>Dale L. Shugars</b>  |                                       | 2. Identification Number                                       |
| (b) Address (number and street) <input type="checkbox"/> Check if address changed<br><b>5315 Angling Rd</b> |                                       |  |
| (c) City, State, and ZIP Code<br><b>Portage, MI 49024</b>   |                                       |  |
| 3. Party Affiliation<br><b>Republican</b>   | 4. Office Sought<br><b>U.S. House</b> | 5. State & District of Candidate<br><b>Michigan District 6</b> |

**DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE**

B. I hereby designate the following named political committee as my Principal Campaign Committee for the 2002 election(s).  
(year of election)

NOTE: This designation should be filed with the appropriate office listed below.

|  |
|--|
| (a) Name of Committee (in full)<br><b>Shugars for Congress</b> |
| (b) Address (number and street)<br><b>5315 Angling Rd</b>      |
| (c) City, State, and ZIP Code<br><b>Portage, MI 49024</b>      |

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**

(Including Joint Fundraising Representatives)

7. 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   |

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<br><b>Dale L. Shugars</b> | Date<br><b>1-7-02</b> |
|--|-----------------------|

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

**CANDIDATES FOR THE OFFICE OF:**

U.S. Senate mail to:  
Secretary of the Senate  
Office of Public Records  
232 Hart Senate Office Bldg.  
Washington, DC 20510-7116

All other candidates  
mail to:  
Federal Election Commission  
999 E Street, N.W.  
Washington, DC 20463

For further information contact:  
Federal Election Commission  
Toll-free 800/424-9630  
Local 202/694-1100

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Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

|   |                                      |
|---|--------------------------------------|
| <input checked="" type="checkbox"/> Hand Delivered                                  | Date of Receipt<br><i>1-9-02</i>     |
| <input type="checkbox"/> First Class Mail   | POSTMARKED                           |
| <input type="checkbox"/> Registered/Certified Mail                                  | POSTMARKED (R/C)                     |
| <input type="checkbox"/> No Postmark  |                                      |
| <input type="checkbox"/> Postmark Illegible   |                                      |
| <input type="checkbox"/> Received from the House office of Records and Registration | Date of Receipt                      |
| <input type="checkbox"/> Received from the Senate Office of Public Records          | Date of Receipt                      |
| <input type="checkbox"/> Other ( Specify):  | Postmarked<br>and/or Date of Receipt |
| <input type="checkbox"/> Electronic Filing  |                                      |
| <i>JM10</i><br>PREPARER   | <i>1-9-02</i><br>DATE PREPARED       |