## Image# 26960029610 FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in f	ull)							
BOB CHARLES HOGUE								
(b) Address (number and	street)				2. Identificatio	n Number		
155 KAAPUNI DRIVE					H6HI02285			
(c) City, State and ZIP C	ode				3. Is This	New		Amendeo
KAILUA HI 96734					Statement	X (N)	OR	(A)
<ol> <li>Party Affiliation</li> </ol>	5. Off	ice Sought		6. State & Dis	strict of Candidat	te		
REPUBLICAN PARTY	Ho	use		HI 02	2			
	DESIGN	IATION OF PRI	NCIPAL (	CAMPAIGN	COMMITTEE			
7. I hereby designate the followi	na named politic	al committee as my P	rincinal Cam	naign Committee	o for the	2006	electio	n(s)
NOTE: This designation sh					(ye	ar of election)		
(a) Name of Committee (in	ı full)							
Bob 2 Congress								
(b) Address (number and	street)							
25 Maluniu Avenue, Si	uite 207	Box 171						
(c) City, State and ZIP C	ode							
Kailua		HI 9673	4					
	DESIGN		HER AUT	HORIZED C		5		
<ol> <li>I hereby authorize the followir candidacy.</li> </ol>		(Including Jo	int Fundrais	ing Representa	tives)		s on beh	alf of my
-	g named comm nould be filed w	(Including Jc	int Fundrais אין principal כ	ing Representa ampaign commit	tives)		s on beh	alf of my
candidacy. <b>NOTE:</b> This designation sh	g named comm nould be filed w I full)	(Including Jc	int Fundrais אין principal כ	ing Representa ampaign commit	tives)		s on beh	alf of my
candidacy. <b>NOTE:</b> This designation sh (a) Name of Committee (in (b) Address (number and b)	ig named comm hould be filed w full) street)	(Including Jc	int Fundrais אין principal כ	ing Representa ampaign commit	tives)		s on beh	alf of my
candidacy. NOTE:This designation sh (a) Name of Committee (in	ig named comm hould be filed w full) street)	(Including Jc	int Fundrais אין principal כ	ing Representa ampaign commit	tives)		s on beh	alf of my
candidacy. <b>NOTE:</b> This designation sh (a) Name of Committee (in (b) Address (number and b)	ig named comm hould be filed w full) street)	(Including Jc	int Fundrais אין principal כ	ing Representa ampaign commit	tives)		s on beh	alf of my
candidacy. <b>NOTE:</b> This designation sh (a) Name of Committee (in (b) Address (number and (c) City, State and ZIP Com	ig named comm hould be filed w full) street) de	(Including Jo	int Fundrais	ing Representa ampaign commiti nittee.	ttives) tee, to receive and	d expend fund		alf of my
candidacy. NOTE:This designation sh (a) Name of Committee (in (b) Address (number and (c) City, State and ZIP Com DECLARATIO	g named comm nould be filed w full) street) de <b>N OF INTEI</b>	(Including Jo ittee, which is NOT m ith the principal cam	oint Fundrais ny principal c npaign comm	ing Representa ampaign commit hittee. NAL FUNDS	ttives) tee, to receive and	d expend fund		alf of my
candidacy. NOTE:This designation sh (a) Name of Committee (in (b) Address (number and (c) City, State and ZIP Com DECLARATIO	g named comm nould be filed w full) street) de <b>N OF INTEI</b>	(Including Jo ittee, which is NOT m ith the principal cam	oint Fundrais ny principal c npaign comm	ing Representa ampaign commit hittee. NAL FUNDS	ttives) tee, to receive and	d expend fund		alf of my
candidacy. NOTE:This designation sh (a) Name of Committee (in (b) Address (number and (c) City, State and ZIP Com DECLARATIO	g named comm nould be filed w full) street) de <b>N OF INTEI</b>	(Including Jo ittee, which is NOT m with the principal cam NT TO EXPENE	oint Fundrais ny principal c npaign comm	ing Representa ampaign commit hittee. NAL FUNDS	ttives) tee, to receive and	d expend fund	nly)	alf of my
candidacy. NOTE:This designation sh (a) Name of Committee (in (b) Address (number and (c) City, State and ZIP Com DECLARATIO	ig named comm nould be filed w full) street) de <b>N OF INTEI</b> nds exceeding t	(Including Jo ittee, which is NOT m ith the principal cam NT TO EXPENE the threshold amount of	oint Fundrais ny principal c npaign comm	ing Representa ampaign commit nittee. NAL FUNDS R. 400.9) by 0.00	ttives) tee, to receive and <b>6 (House or \$</b> for the primar	d expend fund	nly)	alf of my
candidacy. <b>NOTE:</b> This designation sh (a) Name of Committee (in (b) Address (number and (c) City, State and ZIP Con <b>DECLARATIO</b> I intend to expend personal fu	g named comm hould be filed w full) street) de <b>N OF INTEI</b> nds exceeding t 9/ 9E	(Including Jo ittee, which is NOT m with the principal cam NT TO EXPEND the threshold amount of the threshold amount of the threshold amount of the threshold amount of	oint Fundrais ny principal c npaign comm <b>D PERSO</b> (see 11 C.F.F	ing Representa ampaign commit nittee. NAL FUNDS R. 400.9) by 0.00 0.00	tives) tee, to receive and <b>5 (House or \$</b> for the primar for the genera	d expend fund	nly)	alf of my
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