

07 JUN -7 PM 12:14

FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) William Dale Cardwell		
(b) Address (number and street) <input type="checkbox"/> Check if address changed 1007 Virginia Avenue, Suite 220		2. Identification Number
(c) City, State, and ZIP Code Atlanta, GA 30354		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation Democratic	5. Office Sought Senate	6. State & District of Candidate Georgia

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the **2008** 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) Dale Cardwell for Senate, Inc.
(b) Address (number and street) 1007 Virginia Avenue, Suite 220
(c) City, State, and ZIP Code Atlanta, GA 30354

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)
(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

9A for the primary election, and

9B 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 Dale Cardwell	Date 6/4/07
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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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27020190663

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Mo. Day Year	Month Day	\$	Total Postage & Fees
Time Accepted <input type="checkbox"/> AM <input type="checkbox"/> PM	Scheduled Time of Delivery Noon <input type="checkbox"/> 3 PM <input type="checkbox"/>	\$	Acceptance Emp. Initials
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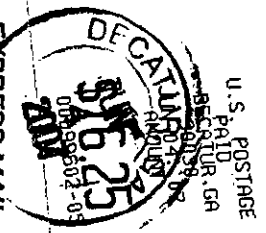
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United States Senate

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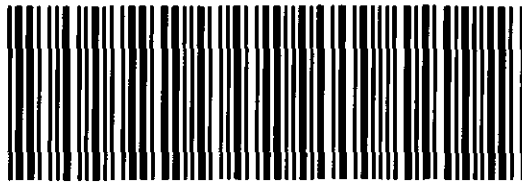
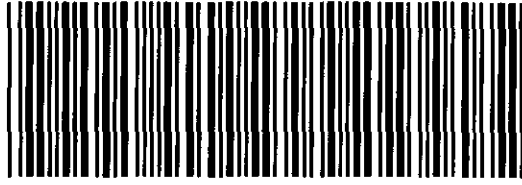
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