

**2-NEW**  
**STATEMENT OF CANDIDACY**  
(see reverse instructions)

RECEIVED  
 FEDERAL ELECTION  
 COMMISSION MAIL ROOM

|   |  |
|---|--|
| 1. (a) Name of Candidate (in full)<br><b>Garland C. McWatters, Jr. (Calhoun)</b>                        |  |
| (b) Address (number and street) <input type="checkbox"/> Check if address changed<br><b>529 N. 11th</b> |  |
| (c) City, State, and ZIP Code<br><b>Ponca City, Ok 74601</b>  | 2. Identification Number<br><b>HOOR05072</b> |
| 3. Party Affiliation<br><b>Democrat</b>   | 4. Office Sought<br><b>U.S. House of Rep</b> |
| 5. State & District of Candidate<br><b>OKLAHOMA DISTRICT 5</b>  |  |

SEP 21 2 28 PM '99

**DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE**

7. I hereby authorize the following named political committee as my Principal Campaign Committee for the **2000** 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>McWatters for Congress Committee</b> |  |
| (b) Address (number and street)<br><b>529 N. 11th</b>                      |  |
| (c) City, State, and ZIP Code<br><b>Ponca City, Ok 74601</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>Garland C. McWatters, Jr.</b> | Date<br><b>9-15-99</b> |
|--|------------------------|

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §487g.

**CANDIDATES FOR THE OFFICE OF:**

U.S. Senate mail to:  
 Secretary of the Senate  
 Office of Public Records  
 222 Hart Senate Office Bldg.  
 Washington, DC 20510-7118

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 800-424-9530  
 Local 202/219-3420

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2025 RELEASE UNDER E.O. 14176

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 type="checkbox"/> Hand Delivered   | Date of Receipt                      |
| <input checked="" type="checkbox"/> First Class Mail                                | POSTMARKED<br>9-15-99                |
| <input type="checkbox"/> Registered/Certified Mail                                  | POSTMARKED                           |
| <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>JH</i><br>PREPARER   | 9-21-99<br>DATE PREPARED             |

99-03-482-2753