

FEC FORM 2

STATEMENT OF CANDIDACY

RECEIVED
FEC MAIL
OPERATIONS CENTER

1. (a) Name of Candidate (in full) TOM BERRY		2. Identification Number	
(b) Address (number and street) 1309 W. FARROW AVE. #15		☐ Check if address changed	
(c) City, State, and ZIP Code CHICAGO, IL 60626-1859		3. Is This Statement ☒ New (N) OR ☐ Amended (A)	
4. Party Affiliation DEMOCRATIC	5. Office Sought U.S. CONGRESS	6. State & District or Candidates ILLINOIS - 6TH CONGRESSIONAL DISTRICT	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named principal 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)
CITIZENS FOR TOM BERRY

(b) Address (number and street)
439 E. GREEN OAKS COURT

(c) City, State, and ZIP Code
ADDISON, IL 60101

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

2A

0.00

for the primary election, and

2B

0.00

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 submitted this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate

Date

Tom Berry

2/23/04

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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Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

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

☐ Hand Delivered	Date of Receipt
☒ USPS First Class Mail	Postmarked <i>2-24-04</i>
☐ USPS Registered/Certified/Priority/Express Mail	Postmarked (R/C)
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☐ Overnight Delivery Service (Specify):	Shipping Date
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☐ Other (Specify):	Date of Receipt or Postmarked
<i>Chap</i> PREPARER	<i>3-1-04</i> DATE PREPARED