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FEC FORM 2

TATEMENT OF CANDID	ACY		AFLE	क् र:5प	
(a) Name of Candidate (in full)	2664 6	gyn	- H		· · · · · · · · · · · · · · · · · · ·
(b) Address (number and street)	Check if address		2. identification	n Number	
6434 51	MMS ST	•		.	
(c) City, State, and ZIP Code ARVADA CO	222211		3. is This Statement	t I (N) O	Amended R (A)
	. Office Sought	6. State & Dist	rict of Candidate	,	
DEMOCRAT	CONGIESS-	CO:	- チ	_	
	IGNATION OF PRIN	CIPAL CAMPAIG	COMMITT	FF	
i hereby designate the following name			milities for the $ ilde{\mathscr{L}}$		ection(s).
NOTE: This designation should be file	d with the appropriate office	listed in the instructions.			. <u> </u>
(a) Name of Committee (in full)					
PEG-6-4 L.	AMM FOR	Cangre.	<u>55.</u>		
(b) Address (number and street)					
P. O. Bo	x 7404	190		_ _	
(c) City, State, and ZIP Code	•	· · · · /	_		
ARUADA,	Co	3000 6	•		
DES	IGNATION OF OTH	FR AUTHORIZED	COMMITTI	FES	
DES		undraising Representation			•
candidacy. NOTE: This designation should be fix (a) Name of Committee (in full)	ad with the principal campaig	n committee.		 ,	
(b) Address (number and street)					
Code Code					<u></u>
(c) City, State, and ZIP Code					•
DECLARATION O	F INTENT TO EXPEN	ID PERSONAL FL	JNDS (Hou	se or Senate	Only)
). I intend to expend personal funds ex					
	9A 1	, 0,00	for the prim	ary election, and	
	9B	0.00	for the gene	eral election.	
If you do not intend to expend person	al funds exceeding the three	shold amount for either el	ection, you must	enter "0.00" for e	ach.
I cartify that I have exer	nined this Statement and to t	he best of my knowledge	and belief it is b	rue, carrect and c	omplete.
Signature of Calididate		 	Date		
(Juggy	Farum	ر 	4.	-12-	-05
NOTE: Submission of false, emonéous,	or incomplete information ma	ay subject the person eigr	ning this Stateme	ent to penalties of	2 U.S.C. §437g.
E3AN039.PDF	<u> </u>	· · · · · · · · · · · · · · · · · · ·			FEC FORM 2 (REV. 02)

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PREPARER (3/2005)	DATE PREPARED