

# FEC FORM 2

## STATEMENT OF CANDIDACY

|                                                                 |                                      |                                                        |
|-----------------------------------------------------------------|--------------------------------------|--------------------------------------------------------|
| 1. (a) Name of Candidate (in full)<br><u>Carol Castagnero</u>   |                                      | 2. Identification Number<br><u>H8FL05116</u>           |
| (b) Address (number and street)<br><u>4119 Glisson Dr</u>       |                                      | <input type="checkbox"/> Check if address changed      |
| (c) City, State, and ZIP Code<br><u>Lakeland, FL 33810-1936</u> |                                      | 3. Is This Statement New (N) OR Amended (A) <u>X</u>   |
| 4. Party Affiliation<br><u>Democrat</u>                         | 5. Office Sought<br><u>U.S. Rep.</u> | 6. State & District of Candidate<br><u>FL Dist. 05</u> |

### 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)<br><u>Carol Castagnero for Congress</u> |
| (b) Address (number and street)<br><u>4119 Glisson Dr</u>               |
| (c) City, State, and ZIP Code<br><u>Lakeland, FL 33810-1936</u>         |

### 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 000 for the primary election, and  
9B 000 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<br><u>Carol Castagnero</u> | Date<br><u>2-3-08</u> |
|---------------------------------------------------|-----------------------|

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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FEC FORM 2 (REV. 02/2003)

Washington , D.C. 20463

Carol Castagnero

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To: Federal Elections Commission

Name: Madelynn M. Lane

CC:

Phone:

Fax: (202) 219-0174

From: Carol Castagnero

Date Sent: 02-03-08

Number of Pages: 2

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Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
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N/A  
PREPARER

N/A  
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(5/2004)

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