

**FEC FORM 2
STATEMENT OF CANDIDACY**

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2007 DEC 13 AM 8:10

1. (a) Name of Candidate (in full) John Laesch		2. Identification Number H6IL14111
(b) Address (number and street) PO Box 284		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State and ZIP Code Sugar Grove IL 60554-0284		
4. Party Affiliation <i>Democratic</i>	5. Office Sought House	6. State & District of Candidate IL 14

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

special

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) Friends Of John Laesch		
(b) Address (number and street) PO Box 284		
(c) City, State and ZIP Code Sugar Grove IL 60554-0284		

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	0.00	for the primary election, and
9B	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 examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

Signature of Candidate John Laesch	Date 12/07/2007
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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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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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	12/13/07
PREPARER	DATE PREPARED

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