FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)		
Judy McCain - Belk		

(b) Address (number and street)	2. Identification Number
8610 McMillan Road	H2AL01119

(c) City, State and ZIP Code		3. Is This Statement	X New (N)	OR	Amended (A)
Citronelle	AL 36522				

4. Party Affiliation	5. Office Sought	6. State & District of Candidate
DEMOCRATIC PARTY	House	AL 1

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political 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)

Judy McCain-Belk for Congress Campaign Committee

(b) Address (number and street)

Post Office Box 307

(c) City, State and ZIP Code

Citronelle   AL   36522

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	Date
Judy McCain - Belk	03/19/2004

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.