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**FEC FORM 2**  
**STATEMENT OF CANDIDACY**

2003 DEC 24 4 10 35

|   |   |  |  |
|---|---|--|--|
| 1. (a) Name of Candidate (in full)<br><b>Bill Spadea</b>        |   | 2. Identification Number   |  |
| (b) Address (number and street)<br><b>P.O. Box 47</b>           |   | <input type="checkbox"/> Check if address changed  |  |
| (c) City, State, and ZIP Code<br><b>Little Silver, NJ 07739</b> |   | 3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A) |  |
| 4. Party Affiliation<br><b>Republican</b>                       | 5. Office Sought<br><b>House of Representatives</b> | 6. State & District of Candidate<br><b>NJ-12</b>   |  |

**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)<br><b>Bill Spadea for Congress</b> |
| (b) Address (number and street)<br><b>P.O. Box 47</b>              |
| (c) City, State, and ZIP Code<br><b>Little Silver, NJ 07739</b>    |

**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. 400.8) by

|    |   |   |   |                               |
|----|---|---|---|-------------------------------|
| GA | 0 | 0 | 0 | for the primary election, and |
| SB | 0 | 0 | 0 | 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> | Date<br><b>12/22/03</b> |
|---|-------------------------|

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 Commission has added this page to the end of this filing to indicate how it was received.

|   |                                      |
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| <input checked="" type="checkbox"/> Hand Delivered                                  | Date of Receipt<br>12/24/03          |
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| <i>ja</i><br>PREPARER   | 12/24/03<br>DATE PREPARED            |