

Image# 201809149121715130

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Ellyson, Daniel, Evan, ,			2. Candidate's FEC Identification Number H8GA08092	
(b) Address (number and street) PO Box 8094		<input checked="" type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Warner Robins GA 31095		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate GA 08		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) DANIEL ELLYSON 2018		
(b) Address (number and street) 714 SOUTH GAY STREET		
(c) City, State, and ZIP Code KNOXVILLE TN 37902		

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		

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 Ellyson, Daniel, , , <i>[Electronically Filed]</i>	Date 09/14/2018
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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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