FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full)								
Baxley, Nancy, Jackson, Mrs.,								
(b) Address (number and street) P.O. Box 53					2. Candidate's FEC Identification Number H0TN03445			
(c) City, State, and ZIP Code					3. Is This	Ne	W	Amended
Signal Mountain TN 37377					Stateme	ent X (N) OR	(A)
4. Party Affiliation	5. Office Sought			6. State & Distr	rict of Candida	ate		
UN	House			TN	03			
DE	SIGNATION OF	PRINC	IPAL	CAMPAIGN		ITEE		
7. I hereby designate the following nar	ned political committee	e as my Pr	incipal (Campaign Comm		2020 (year of elec	electio	on(s).
NOTE: This designation should be f	iled with the appropriat	te office lis	sted in th	ne instructions.				
(a) Name of Committee (in full)								
Citizens for Nancy E	Baxley							
	-							
(b) Address (number and street) P.O. Box 53								
(c) City, State, and ZIP Code								
Signal Mountain				TN	37377			
DE	SIGNATION OF	OTHE	R AU	THORIZED	СОММІТІ	TEES		
		-	-	g Representative				
	·	-						
8. I hereby authorize the following nam	ied committee, which i	s NOT my	princip	al campaign corr	nmittee, to rec	ceive and exp	end funds	on behalf of my
candidacy.								
NOTE: This designation should be f	led with the principal c	ampaign	committe	ee.				
(a) Name of Committee (in full)								
(b) Address (number and street)								
(c) City, State, and ZIP Code								
I certify that I have exa	mined this Statement a	and to the	best of	my knowledge a	nd belief it is	true, correct	and compl	ete.
Signature of Candidate					Date			
Baxley, Nancy, Jackson, Mrs.,					00/44/0000			
			[Elect	tronically Filed]	02/11/202	:0		
NOTE: Submission of false, erroneous,	or incomplete informa	tion may s	subject t	he person signin	ng this Statem	ent to penalt	ies of 2 U.S	S.C. §437g.
							FE	C FORM 2 (REV. 02/2009