FEC FORM 2 STATEMENT OF CANDIDACY

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4	(a) Name of Candidate (in full)						
η.	(a) Name of Candidate (in full)Haynes, Keeda, , ,						
	(b) Address (number and street)	Check if address changed			2. Candidate's FEC Identification Number		
	140 Canton Ct				H0TN05382		
	(c) City, State, and ZIP Code	City, State, and ZIP Code				ew Amended	
	Goodlettsville	TN 37072		Statement 🗶 (N	I) OR (A)		
4.	Party Affiliation	5. Office Sought			rict of Candidate		
	Dem	House		TN	05		
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) COMMITTEE TO ELECT KEEDA HAYNES FOR CONGRESS							
	(b) Address (number and street) P.O. BOX 396						
	(c) City, State, and ZIP Code						
	GOODLETTSVILLE			TN	37070		
 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 exa	mined this Statement and to	o the best of	my knowledge a	nd belief it is true, correct	and complete.	
Signature of Candidate Date							
H	laynes, Keeda, , ,		[Elect	tronically Filed]	04/15/2020		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.							
						FEC FORM 2 (REV. 02/2009)	