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## FEC FORM 2

## STATEMENT OF CANDIDACY

	(a) Name of Candidate (in full)							
	DesJarlais, Scott, , Hon.,							
	(b) Address (number and street) 639 Sweetens Cove Rd	☐ Check if address changed				Candidate's FEC Identification Number     H0TN04195		
	(c) City, State, and ZIP Code						New Amended	
	South Pittsburg		TN	3738	0-6414	Statement	(N) OR (A)	
4.	Party Affiliation	5. Office Soug	nt			rict of Candidate		
	REPUBLICAN PARTY	House			TN	04		
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIG	COMMITTEE		
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)							
	NOTE: This designation should be f	iled with the ap	oropriate offic	ce listed in th	ne instructions.			
	(a) Name of Committee (in full)							
	Friends of Scott Des	sJarlais						
	(b) Address (number and street)							
	95 White Bridge Rd							
	Suite 207							
	(c) City, State, and ZIP Code							
	Nashville				TN	37205-1482		
	DE			_	THORIZED g Representativ	COMMITTEES es)		
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.								
	•	ned committee,	which is NO	Γ my principa	al campaign cor	nmittee, to receive and e	expend funds on behalf of my	
	•					nmittee, to receive and e	expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f					nmittee, to receive and e	expend funds on behalf of my	
	candidacy.					nmittee, to receive and e	expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)					nmittee, to receive and e	expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f					nmittee, to receive and e	expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)					nmittee, to receive and e	expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)					nmittee, to receive and e	expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)					nmittee, to receive and e	expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)					nmittee, to receive and e	expend funds on behalf of my	
	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code	iled with the pri	ncipal campa	ign committe	ee.			
	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code	iled with the pri	ncipal campa	ign committe	ee.	nd belief it is true, corre		
Sig	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate	iled with the pri	ncipal campa	ign committe	ee.			
Sig	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code	iled with the pri	ncipal campa	ign committe	ee.	nd belief it is true, corre		
Sig	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate	iled with the pri	ncipal campa	ign committe	my knowledge a	nd belief it is true, corre		
Siq Br	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate	iled with the pri	ncipal campa	the best of	my knowledge a	nd belief it is true, corre  Date  02/24/2021	ct and complete.	
Siq Br	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate  ewer, James, T, Hon.,	iled with the pri	ncipal campa	the best of	my knowledge a	nd belief it is true, corre  Date  02/24/2021	ct and complete.	
Siq Br	candidacy.  NOTE: This designation should be f  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate  ewer, James, T, Hon.,	iled with the pri	ncipal campa	the best of	my knowledge a	nd belief it is true, corre  Date  02/24/2021	ct and complete.	

FEC FORM 2 (REV. 02/2009)