Image# 202001169167204245 PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

									-	
1.	(a) Name of Candidate (in full)									
		McLeod, Elizabeth, D, ,						umbor		
	(b) Address (number and street) 514B Snyder Avenue	☐ Check if address changed				Candidate's FEC Identification Number S0TN00227				
	(c) City, State, and ZIP Code						lew	Amended	t	
	Nashville		TN	3720		`	N) OR	(A)		
4.	Party Affiliation INDEPENDENT	Office Sough Senate	nt		6. State & Dist	rict of Candidate 00				
									_	
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIGN	N COMMITTEE				
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full)									
	McLeod for Senate									
	(b) Address (number and street) 514B Snyder Avenue								_	
	(c) City, State, and ZIP Code									
	Nashville				TN	37209				
 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									
		mined this State	ement and to	the best of	my knowledge a	and belief it is true, correc	t and comple	ete.	_	
	gnature of Candidate					Date			•	
M	IcLeod, Elizabeth, D, ,			[Elec	tronically Filed]	01/16/2020				
N	OTE: Submission of false, erroneous,	or incomplete i	nformation n	nay subject	the person signir	ng this Statement to pena	lties of 2 U.S	S.C. §437g.	_	
1				1						

FEC FORM 2 (REV. 02/2009)