

FEC FORM 2

STATEMENT OF CANDIDACY

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE

C00434787

1. (a) Name of Candidate (in full)
Grover Cleveland Mullins

(b) Address (number and street) ☐ Check if address changed
138 Whitaker Rd

(c) City, State, and ZIP Code
Bulls Gap TN 37711

3. Is This Statement ☒ New (N) OR ☐ Amended (A)

4. Party Affiliation 9 5. Office Sought President 6. State & District of Candidate TN 7

Independent/Democrat

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the _____ 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)
Grover Cleveland mullins for president

(b) Address (number and street)
Same as above

(c) City, State, and ZIP Code

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.

Any That are legal and willing to Assist

(a) Name of Committee (in full)
Grover Cleveland mullins for president

(b) Address (number and street)
Same as above

(c) City, State, and ZIP Code

I would like nothing further

DECLARATION OF INTENT TO EXPEND PERSONAL FUNDS (House or Senate Only)

9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) by

9A

\$10,000

for the primary election, and

9B

\$40,000

for the general election.

If you do not intend to expend personal funds exceeding the threshold amount for either election, you must enter "0.00" for each.

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

Grover Cleveland Mullins Jr.

Date

October 7-2007

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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Federal Election Commission
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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Jmd
PREPARER

10/17/07
DATE PREPARED