

Image# 201807099115261419

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Nickloes, Sarah, Ashley, ,		2. Candidate's FEC Identification Number H8TN02218
(b) Address (number and street) <input type="checkbox"/> Check if address changed PO Box 15		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code Rockford TN 37853		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate TN 02

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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) Friends of S. Ashley Nickloes		
(b) Address (number and street) 528 Roddy Branch Road		
(c) City, State, and ZIP Code Rockford TN 37853		

### 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.

(a) Name of Committee (in full) War Veterans Fund		
(b) Address (number and street) PO Box 26141		
(c) City, State, and ZIP Code Alexandria VA 22313		

*I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.*

<b>Signature of Candidate</b> Nickloes, Sarah, Ashley, , <div style="text-align: right;"><i>[Electronically Filed]</i></div>	<b>Date</b> 07/09/2018
--	---------------------------

**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--