Image# 201705119053522433 PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

_	() N () () () () () () () () (
1.	(a) Name of Candidate (in full)									
	Drummer, Demond, , ,					100 111				
	(b) Address (number and street) 714 South Gay Street Suite 201	☐ Check if address changed				Candidate's FEC Identification Number H8IL01106				
	(c) City, State, and ZIP Code					3. Is This		lew	Amended	
	Knoxville	TN 37902				Staten	nent 🗶 (i	N) OR	(A)	
4.	Party Affiliation	5. Office Soug	ght		6. State & Dist	trict of Candid	date			
	DEMOCRATIC PARTY	House			IL	01				
	D	ESIGNATIO	N OF PR	INCIPAL	CAMPAIGI	N COMMI	ITTEE			
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full) Demond Drummer 2018									
	Demona Drummer	2018								
	(b) Address (number and street)									
	714 S. Gay Street									
	Suite 201									
	(c) City, State, and ZIP Code									
	Knoxville				TN	37902	2			
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.			,, ,	, 0				·	
	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									
	(b) Oily, Olato, and Elli Codo									
	I certify that I have ex	amined this Sta	tement and to	the best of	my knowledge a	and belief it is	true, correc	t and compl	ete.	
Si	gnature of Candidate					Date				
Di	rummer, Demond, , ,			[Elec	tronically Filed]	05/11/20	17			
NC			information r	nav subject	the never signi	4l-i- O4-4	mont to none	Higg of O. I.I.		
	OTE: Submission of false, erroneou	s, or incomplete		may subject	ine person signii	ng this Stater	neni io pena	illes of 2 U.	S.C. §437g.	
	OTE: Submission of false, erroneou	s, or incomplete	inomation	nay subject	ine person signii	ng this Stater	nent to pena	littles of 2 U.	S.C. §437g.	
	OTE: Submission of false, erroneou	s, or incomplete	Illomation	nay subject	ine person signii	ng this Stater	пенс то рена	littles of 2 O.	S.C. §437g.	

FEC FORM 2 (REV. 02/2009)