

F A X**Committee to Elect
Marvell Mitchell**P.O. Box 752015
Memphis, TN 38175-2015To: Travis Brown - Reports Analysis Division
Fax number: 202-219-0174From: The Committee to Elect Marvell Mitchell
Fax number: 901-363-0563

Date: 06/09/06

Regarding: Address Change

Phone number for follow-up:
901-949-3388**Comments:**

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Marvell R. Mitchell		2. Identification Number H6TN09282
(b) Address (number and street) 9375 Zachariah Cove		
(c) City, State, and ZIP Code Memphis, TN 38133		3. Is This Statement ☐ New (N) OR ☒ Amended (A)
4. Party Affiliation Democrat	5. Office Sought Congress	6. State & District of Candidate TN 9th District

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) Committee To Elect Marvell Mitchell
(b) Address (number and street) P. O. Box 752015
(c) City, State, and ZIP Code Memphis, TN, 38175-2015

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)
(b) Address (number and street)
(c) City, State, and ZIP Code

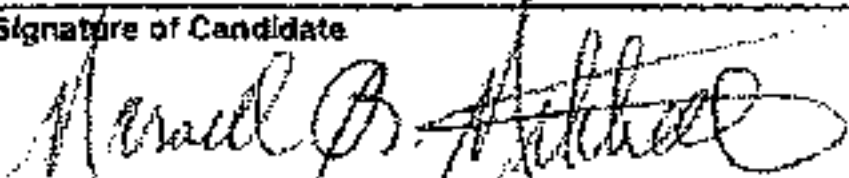
DECLARATION OF INTENT TO EXPEND PERSONAL FUNDS (House or Senate Only)

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

9A for the primary election, and
9B 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 	Date June 9, 2006
---	-----------------------------

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. 5437g.

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

**Federal Election Commission
ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	Date of Receipt
☐ USPS First Class Mail	Postmarked
☐ USPS Registered/Certified	Postmarked (R/C)
☐ USPS Priority Mail	Postmarked Delivery Confirmation™ Label ☐
☐ USPS Express Mail	Postmarked
☐ Postmark Illegible	
☐ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☒ Other (Specify):	Date of Receipt or Postmarked

The document preceding this page was received by FAX at the FEC. The receiving FAX machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.

N/A
PREPARER

N/A
DATE PREPARED

(5/2004)

200309094436