

Image# 202507229764166493

PAGE 1 / 2

FEC FORM 2

STATEMENT OF CANDIDACY

| | | |
|---|--|---|
| 1. (a) Name of Candidate (in full) Mitchell, James "Bo", , , | | |
| (b) Address (number and street) PO Box 210122 | | <input type="checkbox"/> Check if address changed |
| (c) City, State, and ZIP Code Nashville | | TN 37221 |
| 4. Party Affiliation DEMOCRATIC PARTY | | 5. Office Sought House |
| | | 6. State & District of Candidate TN 07 |
| 3. Is This Statement <input checked="" type="checkbox"/> New (N) <input type="checkbox"/> OR <input type="checkbox"/> Amended (A) | | |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2025 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)

BO MITCHELL FOR CONGRESS

(b) Address (number and street)

PO BOX 210122

(c) City, State, and ZIP Code

NASHVILLE

TN 37221

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

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 Mitchell, James "Bo", , , | Date 07/22/2025 |
|---|--------------------|

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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: 97 A=G7 9 @ B9 C1 G H9 L H F9 @ H98 HC 5 F9 DCF H G7 <981 @ CF + H9 A = N5 H C B

Form/Schedule: F2N

Transaction ID :

2025 Special Election.

Form/Schedule:

Transaction ID: