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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Davis, Thomas, Eugene, ,					· · · · · · · · · · · · · · · · · · ·	
	(b) Address (number and street) 248 Faith-Rae Blvd	☐ Check if address changed				Candidate's FEC Identification Number H4TN04247	
	(c) City, State, and ZIP Code					3. Is This New Amended	t
	Morrison		1T	N 3735	57	Statement X (N) OR (A)	
4.	Party Affiliation	5. Office Soug	ght			trict of Candidate	_
	REPUBLICAN PARTY	House			TN	04	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE							
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)						
	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
	(a) Name of Committee (in full)						
Allies of Thomas E Davis to reclaim the Republic.							
	(b) Address (number and street)						
	248 Faith-Rae Blvd						
	(c) City, State, and ZIP Code						_
	Morrison				TN	37357	
							_
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)							
8.	I hereby authorize the following name candidacy.	ned committee	, which is NO	T my princip	al campaign cor	nmittee, to receive and expend funds on behalf of my	
	NOTE: This designation should be filed with the principal campaign committee.						
	(a) Name of Committee (in full)						_
	(b) Address (number and street)						
	(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					Date		
Davis, Thomas, Eugene, ,					10/26/2023		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.							

FEC FORM 2 (REV. 02/2009)