

Image# 201806279115194909

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) HEFFERNAN, PETER, , ,			2. Candidate's FEC Identification Number H8TN06177	
(b) Address (number and street) 110 OAKS DRIVE		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code GALLATIN TN 37066		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate TN 06		

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) HEFFERNAN FOR CONGRESS COMMITTEE		
(b) Address (number and street) PO BOX 9019		
(c) City, State, and ZIP Code GALLATIN TN 37066		

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 Heffernan, Peter, , ,	Date 06/27/2018
<i>[Electronically Filed]</i>	

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

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