

2018 JAN -9 PM 4:49

FEC
FORM 1

STATEMENT OF
ORGANIZATION

Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Lateresa Jones for U.S. Senate

ADDRESS (number and street)

Post Office Box 454



(Check if address
is changed)

Havana

CITY ▲

FL

STATE ▲

32333

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address
is changed)

lateresaajones2018@gmail.com

Optional Second E-Mail Address

lateresaajones@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address
is changed)

www.lateresajones.com

2. DATE

12 / 18 / 2017

3. FEC IDENTIFICATION NUMBER ►

C 00552711

4. IS THIS STATEMENT

NEW (N)

OR



AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Annie Griffin

Signature of Treasurer

Annie Griffin

Date

01 / 02 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

201801100200001154

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate Lateresa Jones

Candidate Party Affiliation Rep Office Sought: House Senate President State FL District 00

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	<input type="checkbox"/> C _____
2.	_____	FEC ID number	<input type="checkbox"/> C _____
3.	_____	FEC ID number	<input type="checkbox"/> C _____
4.	_____	FEC ID number	<input type="checkbox"/> C _____

55110000200109102

Write or Type Committee Name

Lateresa Jones for United States Senate

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Annie Griffin

Mailing Address

10207 Sunrise Lakes Blvd

#101

Sunrise Lakes Blvd

FL

33322

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

305

- 951

- 8311

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Annie Griffin

Mailing Address

10207 Sunrise Lakes Blvd.

#101

Sunrise

FL

33322

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

305

- 951

- 8311

201601092000150

Full Name of Designated Agent

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Telephone number

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Bank of America

Mailing Address

1120 S.E. 17th Street

Ocala

FL

34479

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Wells Fargo

Mailing Address

9488 SW 80th Ave

Ocala

FL

34479

CITY

STATE

ZIP CODE

201801100200001157

2010P110020001150

U.S. POSTAGE
PAID
FORT LAUDERDALE, FL
33345
JAN 03 18
AMOUNT
\$1.61
R2304E105027-14



20013



1000

TO

Secretary of Senate
P.O. Box 77578
Washington
D.C.
20013-7578

U.S. SENATE
SENATE POST OFFICE
JAN 03 2010

U. S. SENATE.
TRACKING NUMBER

10-007103

FROM:

L. James Jones

P.O. Box 454

Havana,

FLORIDA

32333

TO:

Secretary of Senate

P.O. Box 77578

Washington

D.C.

20013-7578

U. S. SENATE
TRACKING NUMBER



10-007103

Utility Mailer
10 1/2" x 16"

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____

Date of Receipt

1-9-18

1-3-18

Postmark

USPS REGISTERED/CERTIFIED _____

Postmark

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX _____

Date of Receipt

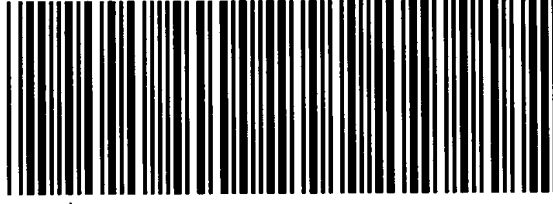
OTHER _____

Date of Receipt or Postmark

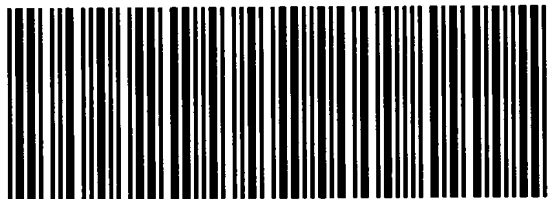
PREPARER **DH** DATE PREPARED _____

1-9-18

20180100200001161 910000200108107



SEN PATCH



SEN PATCH

201801100200001162