2018-10-17-05-00237477

Office Use Only

REPORT OF RECEIPTS **AND DISBURSEMENTS**

2018 OCT 17 AM 11: 49

FER. OL FLECTION

FEC FORM 3 (Revised 05/2016)

FORIVI 3 For An Authorized Committee			BEDUE. Office (Rec Oully Head M			
1. NAME OF COMMITTEE (in	TYPE OR PRINT ▼	•	le: If typing, type e lines.	12FE4M5		
LATERE	SA JONES, FO	DR US .	SENATE	<u> </u>	111111	
			<u> </u>			
ADDRESS (number ar	nd street) 76/18	315+	STREGT	1 1 1 1 1 1 1 1		
V						
Check if did than previous reported. (A	usly I \(\alpha \) A i A			F4 13.4	479-	
2. FEC IDENTIFIC	CATION NUMBER ▼	CITY A		STATE A	ZIP CODE A	
0.005	rad I'	3. IS THIS)	./ NIESA/	AMENDED	STATE ▼ DISTRICT	
- C 005	527,11	REPORT	(N) OR	AMENDED (A)	FL 00	
(a) Quarterly R April 19 July 15	PORT (Choose One) eports: 5 Quarterly Report (Q1) 6 Quarterly Report (Q2) er 15 Quarterly Report (Q3)	Pri	ction Report for the mary (12P) envention (12C)	General (12G) Special (12S)	Runoff (12R) in the State of	
Januar	y 31 Year-End Report (YE) (c	:) 30-Day POST -E	lection Report for the	ne:		
		Ge	eneral (30G)	Runoff (30R)	Special (30S)	
Termina	ation Report (TER)	Election on	M M / D D		in the State of	
•	examined this Report and to th			9 37 2		
Type or Print Name	of Treasurer Annie	Griffin		Mon and /	D D. / Y. Y. Y. X.	
Signature of Treasur	er (June Suf	Jun		Date 09	12/2018	
NOTE: Submission of	false, erroneous, or incomplete	√ information may subj	ect the person signii	ng this Report to the pe	natties of 52 U.S.C. §30109	

2018 - 10 - 17 - 08 - 00287478

SUMMARY PAGE

of Receipts and Disbursements

	FEC Form 3 (Revised 03/2016)		Page 2
	Vrite or Type Committee Name LATERESA JONES FO	OR U.S. SENATE	,
R	Report Covering the Period: From:	08'01'2018	To: 09'37'2018
		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(b) Total Contribution Refunds (from Line-20(d))		
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))		200.
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)		
	(b) Total Offsets to Operating Expenditures (from Line 14)		
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))		
8.	Cash on Hand at Close of Reporting Period (from Line 27)		
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		<i>'</i> .
10.	. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		•

For further information contact:

Federal Election Commission 1050 First Street, N.E. Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

2018-10-17-03-00237479

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 05/2016)

of Receipts

Page 3

Write or Type Committee Name

For us

Report Covering the Period:

From:

131/2018

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) (ii) Unitemized		20.0.00
	(b) Political Party Committees		
	(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		20000
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	LOANS: (a) Made or Guaranteed by the Candidate		
	OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	OTHER RECEIPTS (Dividends, Interest, etc.)		
	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)		700.00

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 05/2016)

of Disbursements

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES		
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate		
 20.	(add Lines 19(a) and (b)) REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees		
	(b) Political Party Committees		
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))		
21.	OTHER DISBURSEMENTS		
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)		
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	rting period	
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	
25.	SUBTOTAL (add Line 23 and Line 24)		[,,,
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)		[,,

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SCHEDULE A (FEC Form 3)

Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11d **Detailed Summary Page** Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FOR US Date of Receipt Mailing Address M - M] / D - D - / Y -City State Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. and the second s Name of Employer Occupation 1 (1 - 13) = 12 (2 - 13) = 1 - 1 (2 - 13) + 13 (3 - 13) Memo Item Receipt For: Election Cycle-to-Date General Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation and a street of the street of Memo Item Receipt For: Election Cycle-to-Date General **Primary** Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address M - M / D - D / Y - Y - Y - Y Presidente de la companya del companya del companya de la companya City State Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. nya kati gwigatika kalasiya y Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

PAGE

OF

FOR LINE NUMBER:

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<u>1</u>
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- 00237
482

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

NAME OF COMMITTEE (In Full)

ATERESA Full Name (Last, First, Middle Initial)

Mailing Address

Candidate Name

Office Sought:

Mailing Address

Candidate Name

Office Sought:

Mailing Address

Candidate Name

Office Sought:

State:

Purpose of Disbursement

Purpose of Disbursement

State:

City

B.

C.

City

Purpose of Disbursement

House Senate

House

Senate

House

Senate President

TOTAL This Period (last page this line number only).....

District:

District:

Full Name (Last, First, Middle Initial)

President

District: Full Name (Last, First, Middle Initial)

President

State

State

FOR LINE NUMBER: PAGE OF Use separate schedule(s) (check only one) for each category of the 18 19a 19b **Detailed Summary Page** Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. US SENATE Date of Disbursement Zip Code **FEC Identification Number** C Amount of Each Disbursement this Period Category/ Type Disbursement For: **Primary** General Other (specify) ▼ Memo Item Date of Disbursement Zip Code **FEC Identification Number** Amount of Each Disbursement this Period Category/ Type Disbursement For: Primary General Other (specify) Memo Item Date of Disbursement Zip Code **FEC Identification Number** Amount of Each Disbursement this Period Category/ Disbursement For: Primary General Other (specify) Memo Item SUBTOTAL of Disbursements This Page (optional).....

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) 13a

			Detailed Su	mmary Page	<u>'</u>		13b
IAME OF COMMITTEE (In Full)	Æ.						
LATERESA JONES	FOR L	15	SENA	TE		_	
LOAN SOURCE Full Name (Last, First, Mic					Election:		
		•			Primary General		
Mailing Address					Other (specify)		
							<u> </u>
City	State	ZIP Code	}				
					Personal Funds of the	Car	ndidate
Original Amount of Loan	Cumulative Pay				ce Outstanding at Close of		
in the main designate weight designs and):						
Friedling Control of the Control of			-				
TERMS Date Incurred		ate Due	. (1	nterest Rate f none, enter 0	Secur ()	ed:	
M = M , / D = D / Y = Y = Y = Y						es [٦,,,
	·····	4 to a	-, * , -, :	u familiade		es L	No
List All Endorsers or Guarantors (if any) to	o Loan Source		Nama of Em-1	over			
Full Name (Last, First, Middle Initial)			Name of Empl	oyer			
Mailing Address			Occupation				
			Amount				2
City State	ZIP Code	———	Guaranteed				
					9 miliozio de la secolo dela secolo de la secolo dela secolo de la secolo dela secolo dela secolo dela secolo de la secolo dela secolo dela secolo dela secolo de la secolo dela seco		·
2. Full Name (Last, First, Middle Initial)			Name of Empl	oyer			
Mailing Address		(Occupation				
		<u> </u>	Amount	·	g in the graduate to gas graduate		
City State	ZIP Code		Guaranteed	1		_	
·					grafia fraggista i antarofia		
3. Full Name (Last, First, Middle Initial)			Name of Empl	oyer			
Mailing Address			Occupation				
		<u> </u>	A				
City State	ZIP Code		Amount Guaranteed	į.			:
			Outstanding:		9.3-7 - 1 2.39. 12.3-29.	.**	
4. Full Name (Last, First, Middle Initial)			Name of Empl	loyer			
Mailing Address	· · · · · · · · · · · · · · · · · · ·		Occupation				
		<u> </u>					
City State	ZIP Code		Amount Guaranteed	· :			
J,			Outstanding:	= f i	dia di Sala di Sala Sala Sala Sala Sala Sala Sala Sal		
SUBTOTALS This Period This Page (optional).	••••••			• ▶ (and green years garderspace agriculture ge		2 15 1
TOTAL 0 TO DO NOT TO THE TOTAL OF THE TOTAL	Δ			– si	a Mari da rellarali a Mari III. Turi agrae in agrae gi		
TOTALS This Period (last page in this line only	/)		•••••	• •	ామియుకుకుకు మందు చ	- ~ é /-	. ::: 2

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

2018-10-17-03-00237484

SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page ____ of Schedule C

rederal Election Commission, Washington, D.C. 20403	- ·	· · · · · · · · · · · · · · · · · · ·			
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER			
LATERESA JONES FOI	2 US Senat	e c00552711			
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)			
Full Name	The second secon	र प्राच्या है । है। स्वास्त्रा इस्टेश है			
	The second secon	Market Market Market State 1988			
Mailing Address		l <u>,</u>			
Walling / Galoob	Data language of Established	M - M - / D - D - / / Y - Y - Y - Y - Y			
	Date Incurred or Established	-			
City State Zip Code	Date Due				
	Date Due	na transport de la companya de la c			
A. Has loan been restructured? No Yes	If yes, date originally incurre	* M M M) / * D + D / * Y - Y + Y + Y + Y + Y + Y + Y + Y + Y +			
B. If line of credit, Amount of this Draw:	Outstanding	The second of the control of the con			
C. Are other parties secondarily liable for the debt incu	rrea? nust be reported on Schedule C.	,			
		· · · · · · · · · · · · · · · · · · ·			
 D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates 		What is the value of this collateral?			
stocks, accounts receivable, cash on deposit, or oth		1			
No Yes If yes, specify:		ි. එ. එ. එමෙන් රැන්මොරු එ. එ. එ. එ			
	Does the lender have a perfected security				
		interest in it? No Yes			
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: What is the estimated value?					
		and the fireform multiplicate the first section of the first section of the fireform of the fi			
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:				
Date account established:	Address:				
M M / D D / Y Y Y Y					
The second of th	City, State, Zip:				
F. If neither of the types of collateral described above exceed the loan amount, state the basis upon which	was pledged for this loan, or if to this loan was made and the batter that the batter is to be the batter to the batter to the batter than the batter to be the	the amount pledged does not equal or asis on which it assures repayment.			
G. COMMITTEE TREASURER		DATE			
Typed Name HUNIE GRIFFIN		M-M / 9-9 / 3 X 7 0			
Signature C C C C C C C C C C C C C C C C C C C	Signature				
James Capter					
H. Attach 'a signed copy of the loan agreement. I. TO BE SIGNED BY THE LENDING INSTITUTION:	- <u></u>				
 To the best of this institution's knowledge, the are accurate as stated above. 	•	•			
II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.					
III. This institution is aware of the requirement that	t a loan must be made on a bas	sis which assures repayment, and has			
complied with the requirements set forth at 11	UFH 100.82 and 100.142 in ma	King this loan.			
AUTHORIZED REPRESENTATIVE		DATE			
Typed Name		Wew Algerty Arakalan			
Signature	Title	The Company of the Section of the Se			

SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

(Use separate schedule(s) for each

PAGE OF FOR LINE NUMBER:

9 10

(check only one) numbered line) **Excluding Loans** NAME OF COMMITTEE (In Full) OR US SENATE Nature of Debt (Purpose): A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mailing Address City State Zip Code Outstanding Balance Beginning This Period and a trackfree to a first of the first of the first of Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period the set of the first of the fir B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period to sign in letter (from the letter file) C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period land of Bruthertough Are tropic to Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period เรื่องเป็นเรื่องที่านเป็นเป็นเสียงก็ก็กำรับได้ = เป็นเรื่องแก้ Leafer of the first Street of a first series. Aller der i die lei Melle Chee Chee Promite unt bestäte einde eine de 1) SUBTOTALS This Period This Page (optional) ------2) TOTALS This Period (last page this line number only) 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

FEC FORM 3Z (File with Form 3)

Part 1: CONSOLIDATION REPORT

NAME OF PRINCIPAL CAMPAIGN COMMITTEE

LATERESA JONES FOR US SENATE

NAME OF COMMITTEE AUTHORIZED BY CANDIDATE (Use Separate Page for Each Committee)

Report Covering Period from: May 1 0 1 2618

to: 79 1 2 9 1 2618

Annie Griffin CTreasurER

	LINE DESCRIPTION			LINE DESCRIPTION	
6(c)	Net Contributions	gazzazara gazza zona en	15	Other Receipts	
7(c)	Net Operating Expenditures		16	Total Receipts	
9	Debts and Obligations Owed TO the Committee	tari programa de la composició de la com	17	Operating Expenditures	
10	Debts and Obligations Owed BY the Committee	garagaran da kalandaran da	18	Transfers to Other Authorized Committees	n den genglieben besonder der der de Sont des Breite bis Grentes de Grentes
11(a)	Contributions from Individuals/Persons Other Than Political Committees		19(a)	Repayments of Loans Made or Guaranteed by Candidate	(೨) ಪ್ರಶಾಣಗಳು ಸಾರ್ವಜ್ಞನಾಗಿ ಪ್ರಭಾಗವಾಗಿ ಪ್ರಭಾವಿಸಿಕೆ ಪ್ರೀತರ ಕಾರ್ವಜ್ಞನಾಗಿ ಪ್ರಶಾಣಕ್ಕೆ ಪ್ರಭಾಗಿ ಪ್ರಭಾಗಿ
11(b)	Contributions from Political Party Committees	an igia ya agangana a ta muatey (ya arree). Kartariin garta ya ta ta ta mara a ta	19(b)	Other Loan Repayments	
11(c)	Contributions from Other Political Committees		19(c)	Total Loan Repayments	<u>2 – 1. – 1. 19. 1. – 1. – 1. – 1. – 1. – </u>
11(d)	Contributions from the Candidate	<u>amahadha (badharin (bi) dian badh ili k</u> kanyanyangangan, mili mininga yawili ili ki kilongan	20(a)	Refunds of Contributions to Individuals/Persons	sana sa mangangan naman nama Karing Sangan naman sa mangan sa sa
11(e)	Total Contributions		20(b)	Refunds of Contributions to Political Party Committees	ing the state of t
12	Transfers from Other Authorized Committees		20(c)	Refunds of Contributions to Other Political Committees	n og komprenje mje stremenje sporte i Som er fra Ørodrædro Øredorffer Øredorf
13(a)	Loans Made or Guaranteed by the Candidate		20(d)	Total Contributions Refunds	and the granger granger grange accuracy are granger of the state of th
13(b)	All Other Loans		21	Other Disbursements	
13(c)	Total Loans		22	Total Disbursements	9-1-5-3
14	Offsets to Operating Expenditures		23	Cash on Hand at Beginning of Reporting Period	The state of the state of the state of the state of
			27	Cash on Hand at Close of Reporting Period	on agrae jamijaasji in gastjastjastja og an josi Lodinaster 1900 in radiostikosti og bestinstikas

1.ATERESA JONES FORUS Senete 76/ NE 3/ Street Ocala, Fr 34479

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SECRETARY OF THE SENATE P.O. BOX 77578
WASHINGTON, D.C. 20013-7578

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	Postmarked	Date of Receipt
USPS First Class Mail	10-12-18	10-17-18
USPS Registered/Certified		Postmarked (R/C)
USPS Priority Mail		Postmarked
USPS Priority Mail Express	S	Postmarked
Postmark Illegible		
No Postmark		
Overnight Delivery Service	(Specify):	Shipping Date
	No	ext Business Day Delivery
Received from House Received	ords & Registration	Date of Receipt Office
Received from Senate Pub	olic Records Office	Date of Receipt
Received from Electronic F	Filing Office	Date of Receipt
Other (Specify):		Date of Receipt or Postmarked
grf		10-17-18
PREPARER (3/2015)		DATE PREPARED
USPS Priority Mail Express Postmark Illegible No Postmark Overnight Delivery Service Received from House Received from Senate Pub Received from Electronic Forms Other (Specify):	(Specify): Note Ords & Registration of the color of the	Shipping Date ext Business Day Delivery Date of Receipt Date of Receipt Date of Receipt Date of Receipt Date of Receipt